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ABSTRACT

The document consists of proceedings from the 1987 Leadership Conference on the topic of least restrictive environment (LRE) for severely disabled students. Contents include the following presentations: "The OSEP (Office of Special Education Programs) Plan for LRE" (G. Thomas Bellamy); "Bringing about Integrated Community-Based Programs for Students with Severe Handicaps" (Wayne Sailor); "Quality Indicators of Exemplary High School Programs for Students with Severe Handicaps" (Barbara Wilcox); "A Collaborative Model for LRE Statewide Implementation" (Henry Schroeder et al.); "Parents' Role in Quality School Programs" (Carol Inman et al.); "Developing District Level Support for LRE" (Harmon Baldwin et al.); "The Education of an Administrator" (Harmon Baldwin); "From a Parent's Point of View" (Cory Moore); "Blueprint for Change" (Mike Hardman); "Developing Building Support among Administrators and Student Body (Jerry Wagner et al.); "Preparing Teachers and Related Services Staff for Integration" (Diane Ryndak et al.); "Building Opportunities for After-School and Out of School Integration" (Robi Kronberg et al.); "Planning for Transition to Work and Community Life" (John Stern et al.); and "Preparing Students with Severe Intellectual Disabilities to Live, Work and Play in Integrated Settings" (Lou Brown). Results of the conference evaluation are presented in an appendix. (JW)

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Proceedings of National Leadership Conference 1987

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Least Restrictive Environment: Commitment to Implementation

May 20-21
Indianapolis, Indiana

THE NATIONAL LRE NETWORK

EC 210391

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Proceedings of the
National Leadership Conference

LEAST RESTRICTIVE ENVIRONMENT: COMMITMENT TO IMPLEMENTATION

Edited by

Marilyn Irwin
Barbara Wilcox

Institute for the Study of Developmental Disabilities

1987

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The points of view expressed in the Proceedings are those of the presenters and do not necessarily reflect the position or policy of the United States Office of Education, and no official endorsement by that office should be inferred.

Bloomington, Indiana

August 1987

For information on additional copies of the Proceedings, please contact The Institute for the Study of Developmental Disabilities, Indiana University, 2853 E. Tenth Street, Bloomington, IN 47405

TABLE OF CONTENTS

Page V

Foreword

Conference Agenda VIII

The OSEP Plan for LRE: Schools are for Everybody!
G. Thomas Bellamy 1

Bringing About Integrated Community-Based Programs for Students with Severe Handicaps
Wayne Sailor 11

Quality Indicators of Exemplary High School Programs for Students with Severe Handicaps: Knowing When You're Doing a Good Job
Barbara Wilcox 29

A Collaborative Model for LRE Statewide Implementation
(**Henry Schroeder, Paul Ash, Brian McNulty, Diane Renne, JoLeta Reynolds**)
Summary by **Richard Long** 49

Parents' Role in Quality School Programs
(**Carol Inman, Barbara Buswell, Teryl Hill, Gladys Devane, Judy Martz**)
Summary by **Vicki Pappas** 57

Developing District Level Support for LRE
(**Harmon Baldwin, Sharon Freagon, Tim McNulty**)
Summary by **Stine Levy** 65

The Education of an Administrator
Harmon Baldwin 69

From a Parent's Point of View
Cory Moore 73

Blueprint for Change
Mike Hardman 83

Developing Building Support Among Administrators and Student Body
(**Jerry Wagner, Don King, Walt Vanderbush**)
Summary by **Richard Long** 117

Preparing Teachers and Related Services Staff for Integration
(**Diane Ryndak, Jennifer Campbell, Kathy Hurdish, Edi Otterson, Nancy Fressle**)
Summary by **Marilyn Irwin** 123

Building Opportunities for After-School and Out of School Integration
(**Robi Kronberg, Tipton Ray, Billie Wilson**)
Summary by **Vicki Pappas** 129

Planning for Transition to Work and Community Life
(**John Stern, Sylvia Panzer, Wendy Wood**)
Summary by **Stine Levy** 137

Preparing Students with Severe Intellectual Disabilities to Live, Work and Play in Integrated Settings
Lou Brown 141

Conference Evaluation 159

Conference Presenters 163

Conference Tapes 165

Foreword

> The integration of disabled students with their non- disabled peers is the fundamental issue confronting parents and professionals who work with handicapped individuals to help them achieve maximum involvement in the educational, vocational, and social fabric of American life.
>
> Madeleine Will
> January 8, 1985

Like everyone in our society, children with severe disabilities and their families have an important interest in the quality of public school programs. It is the collective expectation that education should lead all students to contributing adult lives at home, in the work place, and in their communities. For students with disabilities, like others, schooling is judged successful when it provides the necessary background for full participation in a heterogeneous adult world.

Sadly, many children with severe disabilities still face a major barrier in their preparation for adult opportunities. In many communities, education and related services have evolved as segregated systems--separate programs, separate schools, even separate school districts. Segregating students with disabilities from the people with whom they must ultimately live, work, and play creates an additional handicap and threatens to undermine their chance to learn skills critical to community living and meaningful employment. School integration must be the cornerstone of the nation's commitment to quality lives for people with disabilities.

The least restrictive environment provision of The Education of All Handicapped Children Act established a presumption in favor of educating students with disabilities along side their peers without apparent handicaps. Over the last decade, there has been tremendous growth in schools' ability to provide quality integrated opportunities to students with severe disabilities. At the same time, the concept of least restrictive environment has evolved from a principle guiding educational placement into a term that also embraces functional curriculum and effective instruction that will prepare students to assume contributing roles after school leaving.

More importantly, it has become clear that least restrictive environment is not simply an educational issue. Integration is basic to normalized work, living, and social opportunities as well. This holistic approach to least restrictive environment is apparent in recent initiatives developed by the U.S. Office of Special Education and Rehabilitative Services which have stressed the need to

- Adapt school, work, and living environments to accommodate individuals with substantial handicaps,
- Teach functional life activities that will benefit students outside school and after school leaving,
- Build bridges between school and adult life to support meaningful work and full participation in the community, and,
- Open channels between agencies, programs, and services at all levels to ensure that the support system for individuals with disabilities does not fail.

These trends are described by Madeleine Will, Assistant Secretary for Special Education and Rehabilitative Services, as the "second stage of the revolution."

It was in this spirit of revolution that the 1987 National Leadership Conference was developed. Goals of the Conference were to

- Demonstrate that collaboration among policymakers, local public school personnel, parents, and university professionals can result in system change
- Demonstrate the effectiveness of school programs that incorporate best practices
- Explore strategies for change that are relevant to the needs of parents, teachers, administrators, and advocates of individuals who have severe disabilities.

This document contains the transcribed and edited plenary presentations as well as executive summaries of each concurrent session.

Thanks are due to the many individuals who made both the conference and these Proceedings a reality. We greatly appreciate

- Chris Cartwright of the Indiana University Conference Bureau who worked tirelessly on every detail of conference arrangements
- Nowana Nicholson of the Institute for the Study of Developmental Disabilities whose sense of style brought elegance and flair to the whole event

- Deanna Hines of the Indiana University News Bureau who managed press coverage and relations
- Judith Carson of the Indiana School for the Deaf who arranged interpreter services
- Jim Button the OSERS project officer who provided valuable advice and support along the way
- Each of the presenters who shared their experience and expertise
- Beverely Rockwell who transcribed the tapes of the sessions so that what was learned will not be lost.

Most sincere thanks to Assistant Secretary Madeleine Will, to Nat Jackson and Associates, and to Dr. Henry Schroeder, Director of the Institute for the Study of Developmental Disabilities who demonstrated that collaboration can turn ideas into events.

Barbara Wilcox
Associate Professor
Indiana University

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1987 National Leadership Conference
LEAST RESTRICTIVE ENVIRONMENT: COMMITMENT TO IMPLEMENTATION

TUESDAY 19 MAY

7:00 p.m. Opening Reception
Norman's in Grand Hall UNION STATION

WEDNESDAY 20 MAY

8:00 a.m. Registration
CONVENTION CENTER

9:00 a.m. Introductions
201-204 CONVENTION CENTER

9:30 a.m. Welcome Address
The OSEP Plan for LRE: Schools are for Everybody!
G. THOMAS BELLAMY, Director, Office of Special Education Programs,
U. S. Department of Education

10:30 a.m. Break

11:00 a.m. Opening Address
Bringing About Integrated Community-Based Programs for
Students with Severe Handicaps
WAYNE SAILOR, Department of Special Education,San Francisco State University

12:15 p.m. Lunch

1:30 p.m. Quality Indicators of Exemplary High School Programs for Students with
Severe Handicaps: Knowing When You're Doing a Good Job
BARBARA WILCOX, Department of Special Education, Indiana University

2:45 p.m. Break

3:30 p.m. Concurrent Sessions:

A COLLABORATIVE MODEL FOR LRE STATEWIDE IMPLEMENTATION
(210 CONVENTION CENTER)
Paul Ash, Acting Director of Special Education, Indiana
Brian McNulty, Director of Special Education, Colorado
Diane Renne, Education Program Specialist, Arizona Department of Education
JoLeta Reynolds, Assistant Commissioner of Special Programs, Tennessee
Moderator: **Henry Schroeder**, Director, Indiana University Institute for the Study of
Developmental Disabilities

PARENTS' ROLE IN QUALITY SCHOOL PROGRAMS (211 CONVENTION CENTER)
Barbara Buswell, Colorado Springs CO
Teryl Hill, Eugene OR
Gladys DeVane, Bloomington IN
Judy Martz, Colorado Springs CO
Moderator: **Carol Inman**, Montgomery County MD

DEVELOPING DISTRICT LEVEL SUPPORT FOR LRE (212 CONVENTION CENTER)
Sharon Freagon, School Board Member, DeKalb IL
Tim McNulty, Director of Special Education, Santa Monica CA
Moderator: **Harmon Baldwin**, Superintendent of Schools, Bloomington IN

6:30 p.m. Cash Bar
INDIANA ROOF BALLROOM 140 W. Washington Street

7:30 p.m. Dinner
INDIANA ROOF BALLROOM

8:30 p.m. Dinner Comments
Harmon Baldwin, Superintendent of Schools,Bloomington, IN

THURSDAY 21 MAY

8:00 a.m. Continental Breakfast
CONVENTION CENTER

8:30 a.m. Welcome:
VERNON JOHNSON, Assistant Superintendent,
Indianapolis Public Schools
201-204 CONVENTION CENTER

8:45 a.m. From a Parent's Point of View
CORY MOORE, Montgomery County MD

9:45 a.m. Break

10:15 a.m. Blueprint for Change
MIKE HARDMAN, Department of Special Education,University of Utah

11:30 a.m. Lunch

1:00 p.m. DEVELOPING BUILDING SUPPORT AMONG ADMINISTRATORS AND STUDENT BODY
(210 CONVENTION CENTER)
Don King, Principal, Northwest High School, Indianapolis IN
Walt Vanderbush, Principal, Franklin Community High School, Franklin IN
Moderator: **Jerry Wagner**, Director of Special Education, Washington Township, Indianapolis IN

PREPARING TEACHERS AND RELATED SERVICES STAFF FOR INTEGRATION
(210 CONVENTION CENTER)
Jennifer Campbell, Program Specialist, Paradise Valley School District, Paradise Valley AZ
Kathy Hurdish, Teacher, Morton High School, Hammond IN
Edi Otterson, Teacher, Franklin Community High School, Franklin IN
Moderator: **Diane Ryndak**, Developmental Training Center, Indiana University

BUILDING OPPORTUNITIES FOR AFTER-SCHOOL AND OUT OF SCHOOL INTEGRATION (212 CONVENTION CENTER)
Tipton Ray, Department of Leisure Studies, University of Minnesota
Billie Wilson, Coordinator of Therapeutics,Department of Recreation, Silver Springs MD
Moderator: **Robi Kronberg**, Site Coordinator National LRE Network (CO)

PLANNING FOR TRANSITION TO WORK AND COMMUNITY LIFE
(211 CONVENTION CENTER)
Sylvia Panzer, Arapahoe Community College, Littleton CO
Wendy Wood, Director of Employment Services, Virginia Commonwealth University
Moderator: **John Stern**, Division of Developmental Disabilities, Washington State

2:15 p.m. Break

2:30 p.m. Closing Keynote Address:
Preparing Students withSevere Intellectual Disabilities to Live, Work and Play in Integrated Settings
LOU BROWN, Department for Studies in Behavioral Disabilities, University of Wisconsin
201-204 CONVENTION CENTER

4:30 p.m. Lobby Reception CONVENTION CENTER

x

THE OSEP PLAN FOR LRE: SCHOOLS ARE FOR EVERYBODY!

G. THOMAS BELLAMY

Director, Office of Special Education Programs U.S. Department of Education

I am delighted to be here today at this National Conference on LRE. The conference is a fitting tribute to Assistant Secretary Madeleine Will, Indiana University, and the state of Indiana for their leadership in looking at how we educate children. Missing a meeting like this is, in many ways, missing one of the truly enjoyable parts of the job in Washington. Mrs. Will sends her regrets and best wishes. Although I am honored to be her substitute, I would like to make clear that I do not speak for her. Instead, I would like to talk about what the Office of Special Education Programs (OSEP) is trying to do to implement the initiatives that Mrs. Will has articulated over the years as Assistant Secretary.

I would like to accomplish three things: (1) to describe some basic values that should underlie all of special education; (2) to apply those values to the challenges in serving children with disabilities in the least restrictive environment; and (3) to talk specifically about what OSEP is doing and plans to do.

Values Underlying Special Education

The importance of values in special education -- and, in all disability services -- was stated exceptionally well in an early speech by Madeleine Will. To paraphrase a portion of that speech:

> *We work to give people with disabilities the same kinds of opportunities that the rest of us have, and by extension, we work to improve special education services, not because it is cost-effective, although it happens to be cost-effective; not because it is prudent, although it happens to be prudent; not because it is politically expedient, although it happens to be politically expedient; but because fundamentally it is right and they deserve it.*

Progress in education or progress in society for people with disabilities requires, first of all, that we decide for ourselves what is right. That, in turn, requires that we be explicit about our values, about exactly what it is that people with disabilities deserve from society. The following two statements seem to sum it all up. Both are important; neither supersedes the other; together, they form a conceptual basis for measuring progress in special education.

Special education is accountable for its products. The first value is that special education should be responsible and accountable for its products. Society has chosen to invest a great deal in special education. Financially, special education represents our nation's most significant investment in the competence and participation of people with disabilities. Our society has made a decision that the first 21 years are critically related to the quality of someone's entire life. It is only reasonable that we hold ourselves responsible -- and that society holds us responsible -- for what happens to people with disabilities after they leave school.

Naturally schools are not the only entity with this responsibility. Families, communities, churches, and community agencies are all responsible for what happens to individuals with disabilities. Although, for many people with disabilities, post-school status relates to the quality and availability of adult services, the central focus of this responsibility, in terms of society's investment, is the school. Schools are responsible for its products. But what does that mean? What represents post-school success for someone with a disability?

First of all, it is much the same as post-school success for anyone else. We have managed to say it in many ways in our field. My colleague, Justin Dart, Commissioner of the Rehabilitation Services Administration, talks about productive independence for all Americans. The Developmental Disability Act Amendments of 1984 talk about productivity, independence, and community integration as the standard for measuring success of the programs governed by that legislation. Increasingly, the research literature focuses on quality of life as the outcome toward which we are striving.

From the standpoint of the special education professional community, I think it can be said fairly simply: Special education is successful when people leave school with a job and the skills to perform that job either independently or with affordable support; with a place to live, and the skills to live there, either independently or with affordable support; and with a social network of friends and contacts and neighbors that provide the sustaining support and the opportunities that the rest of us get from the people we live around. If people can leave special education with those three things, I think we have done our job.

That value -- that special education should be responsible and accountable for its products -- places an outcome orientation on the discussion of school effectiveness in general. It creates a long-term view of "effectiveness" and asks us then to reconsider assumptions about curricula, about the conventional wisdom of methods, service location, and so forth. Because the results of the follow-up studies that are now being reported are not very complimentary in terms of special education's past reach, this is especially true. If our society, our economy, and our democracy really is for everyone, then special education must truly take on the significant challenge of enabling and initiating the full participation of youth and young adults in every aspect of community life.

Local schools should be for everyone. The second value that should underlie all of special education is that local schools should be for everyone. From the beginning, P.L. 94-142 established the presumption in favor of the regular education environment. The law stipulates that we remove people from the regular education environment only when absolutely necessary, and only so far as absolutely necessary to meet individual educational needs. A personal paraphrase of the assumption or belief embedded in that provision is as follows: It is better for children; it is better for parents; it is better for communities; it is better for future employers; it is better for peers; and it is better for teachers when children with disabilities attend and are served well by the regular schools in their neighborhood.

In many ways, that is a simple extension of my first belief. If society is for everybody, then schools logically should be for everyone as well. The potential of regular local schools to truly serve children with disabilities well, to meet individual educational needs, has expanded with each advance in knowledge during the decade since the passage of P.L. 94-142. Since then, advances in curricula, in peer support, in instructional procedures, in employment preparation and so forth, have gradually eliminated many of the justifications for removal of children and youth with disabilities from the regular classroom environment.

Today, the ability of a local school to serve most or all of these students with disabilities is closely related to the ability of that school to provide effective quality education for any student. To me, this value places special education exactly where it belongs: at the very center of the school reform movement. If we truly believe that schools are for everybody, then the first measure of an effective school should be the extent to which it can serve all of its students. It is only after all students, including those with disabilities, are taught in the same school that such measures as grade equivalences begin to make sense. What can we make of these other measures if they are applied only to the brighter students who are left after some unknown percentage of the student population is referred to special programs?

Special education should be responsible for its products, and local schools should be for everybody. Those two concepts form the bedrock values and foundation on which all the rest of special education can be built. In the context of today's topic, they create a set of challenges that I believe we all share, challenges related to how we go about providing opportunities for youngsters with disabilities in the regular school.

Shared Challenges

Public Law 94-142 is only a decade old, and the initial implementation efforts of that law focused on ways to extend services to students who were previously unserved in the schools, and on implementing the procedural safeguards that the law requires with regard to existing services. I believe that these efforts have proceeded fairly well. The special education system is not perfect by any means, but it is working, and far better than many of us would expect any federal public program to be working after only ten years.

Today we are moving toward a second generation of implementation issues and problems -- moving beyond simply extending services to unserved children and youth, and beyond the basics of the procedural safeguards -- to questions involving ways to translate new information and technology into real benefits for youngsters with disabilities. How do we offer real options to students and their families? How do we become accountable to students, families, and communities? How can we offer special education in a way that fosters rather than inhibits community participation?

The challenge that we face collectively as professionals in the field of special education is to figure out how to best use technological and information advances, given the collective energy of the five-way partnership that P.L. 94-142 establishes among the federal Office of Special Education Programs, the state special education administrative offices (or state education agencies), the local education agencies, parents, and universities. We obviously work with many other groups, but those five are the primary agents in making the special education system work.

Given the energy and the resources that the partnership has, what can we do today that will give us the greatest margin of improvement in special education? In the area of least restrictive environment, I am convinced that the greatest improvement will be realized by focusing this collective energy on building the capacity of local schools to serve the maximum number of children with disabilities as well as possible. In many ways, the activities resulting from the initial implementation of P.L. 94-142 and from earlier development of special education services involved increasing the provision of services, but providing those services in segregated situations. These segregated options are fairly entrenched around the country. What we do not have in place around the nation in many, many localities are options at the building level that parents and children can legitimately choose. It is time to spend a significant amount of energy building the capacity of local schools to serve all students, including those with severe disabilities. This can be conceptualized either as an issue of enforcement of the least restrictive environment provisions of the law and the regulations, or as an issue of implementing best practice.

If you accept my proposition that building local school capacity to serve all youngsters really is the best way to spend our collective energy right now, then it seems to me that we share four challenges.

The challenge to administrators. The first challenge is primarily to administrators, especially local administrators, to deploy special education resources in a way that truly does create local school options. There is a pressing need to organize the logistics -- the transportation, the insurance, the financing, the deployment of staff, access to specialized services, and so forth -- in ways that will ensure their presence in the regular school, and then to generate the kind of ongoing support that is necessary from other regular school personnel. This really is an administrative decision.

We in the special education profession have assumed that individual planning mechanisms would in fact create the entire range of options that are needed, and, in some cases, that has happened. In other cases, however, it has happened only through contentious battles between parents and school districts trying to develop options that did not previously exist. There must be parallel development between the individual planning mechanism and the administrative development of real options in the local schools.

It is, indeed, true that there are some significant barriers impeding accomplishment of this parallel development. Many local administrators are faced with bond commitments to the community, construction, inertia, political support, existing service delivery mechanisms, and so forth. Those communities that started out by building the primary capacity for service delivery to students with disabilities in the local school and then used other options for back-up have had a much easier time than communities that started by building the primary capacity for provision of special services outside the regular schools. These communities are now trying, with difficulty, to build some capacity in the local school program.

While the burden of allocating resources falls primarily to the local administrator, this challenge is one that we as special education professionals all share. There are state and federal incentives for segregation in finance, in funding formulas, and in regulations. There are state teacher certification mechanisms that differentiate so specifically among types of disabilities that we unintentionally give the impression to the community at large that the different disabilities are exotic; in doing this, we increase the likelihood that services will not be provided -- or even considered -- in local schools.

There are many ways that we can view state or federal activities to determine the types of support that need to be provided to the local administrators. The challenge to parents and institutions of higher education is to be involved in the change process and to create a supportive environment in which local administrators can attempt to build the capacity of local schools to provide quality services.

The challenge to instructional staff. The second challenge facing us is to take advantage of the opportunities provided by local school instruction. Integration is not the same as education. The presumption is that regular school placement creates expanded opportunities, expanded learning possibilities, expanded contacts with people without disabilities, expanded vocational training programs, and so forth. Integration is most beneficial when we are smart enough to take advantage of it.

This particular challenge is primarily for teachers and all of the support staff available to back that teacher. Do we in fact have a curriculum that takes advantage of regular school placement? Do we have a systematic mechanism for fostering attitude change or building positive attitudes among peers? Do we have a systematic way to involve the community around the school? Do we have a systematic way to take advantage of the potential increases in parent involvement that proximity can bring? This challenge is to make sure that the rhetoric and the reality of local school placements match. It is a challenge to all of us.

The challenge to use the local school. The third challenge impinges first on parents; next, on the instructional delivery staff in the schools; and finally, on all the rest of us. This is simply the challenge to choose to use the local school capacity that is developed. Ultimately, where every individual child in special education is served is to be determined, not by administrative planning, not by research, but by the individualized planning team that has the interests of that particular child in mind.

What that means is that the participants in the individual planning process -- the parents, the teacher, and the service providers in the schools -- must possess a great deal of confidence in the commitment and the competence of the local school options that are available for that particular child. Individualized education planning teams need clear information about the opportunities and differences that exist among the different placement options. They need clear information about the potential results inherent in different placement options and what actually occurs within those different placement options in the particular community. We all share in the obligation to provide that information.

The challenge to state and federal administrations. The fourth challenge, one which relates most directly to state and federal administrations, is the need to keep score. We need a clear set of measures that let us know how we are doing. This is an issue that involves the whole special education spectrum, not just that which relates to LRE issues. We need a cluster of student outcome measures that we can use to give regular feedback to ourselves and the field as a whole on how the investment in special education is working.

Some of these outcome measures should relate to the extent to which schools have been successful in developing attractive options in local public schools. We might ask for example, what is the percentage of the total school population in a state or a district that is served in local schools? What is the percentage of the total student population in a district that is served out-of-district, or the percentage of the total school population in a district or state that is served in schools with unnaturally high percentages of students with disabilities?

These are not the only effectiveness indicators we need in special education, but they would be critical components. I am convinced that schools and special education programs are most effective when they have developed options for all the students, and when those options implement existing best practice well enough that the individualized education program planning teams that are concerned with individual children select those local options. That to me is a measure of our effectiveness.

What OSEP is Doing: Discretionary Programs and Monitoring

Let me describe what the Office of Special Education Programs (OSEP) is doing. First of all, we have both discretionary program activities and monitoring activities in our interaction with the states relative to the LRE initiative.

In the discretionary areas, we are in the process of preparing a three-to-five-year plan that examines all of our discretionary programs to ascertain what we might do with discretionary competitive grant funds to foster Assistant Secretary Will's initiative on LRE. We are currently in the midst of ongoing policy discussions, but I can share with you three themes that I believe will result in the development of this formal long-range plan.

First, I expect our Office to continue to spend some of its resources fostering state initiatives on LRE. Public Law 94-142 and, hence, special education is in reality a state-administered system. Critical decisions for how special education programs operate are made at the state level, and much of the role of the federal government involves fostering the development of these state initiatives. This conference itself provides evidence that fostering state initiatives has long been a strategy in implementing least restrictive environment programming. The National LRE Project has, from the beginning, been an effort to provide assistance to states that really wanted to exert leadership in LRE.

In fact, there is now available a grant competition focused on state-wide change. That grant competition, in a sense, offers a very simple proposition to states: Tell us where children in special education programs are currently served in your state; what is the distribution? Tell us where you think that distribution ought to be five years from now, and what are you going to do to get from where you are now to that point? States that have plans that make a significant difference in distribution of placements, and states whose plans show consideration of best placement and attention to the provision of quality services, are the states we will fund. If everything proceeds according to plan, there will be four or five states that are funded for significant state-wide change projects in LRE programming for children and youth with severe disabilities by next fall.

Secondly, we are interested in seriously addressing the need to improve building-level capacity to serve students with disabilities well: What are the curriculum development needs? What are the instructional procedure needs? What are the needs for building effective and functioning social networks for children with disabilities? How do we make these realistic considerations, capable of being implemented in the schools? Our strategies in these areas must involve technical assistance and will require continuing research, development, and evaluation. The state-wide change competition currently available on LRE local projects fits within this general strategy.

A soon-to-be-announced research and technical assistance institute on regular school placement addresses the same set of issues: How do we ensure that, once a decision is made to provide education to a handicapped youngster in a local school, the back-up support is made available to do it well?

The third theme in our long-range plan is to provide public information. Again, decisions about where students with disabilities are to be educated are rightfully made during the Individualized Education Program planning meeting that includes parents, and the educational staff directly involved with individual children. It is the people involved in these meetings who must have information about the actual and potential services available in all the placement options.

Too few people know of the quiet but incredibly interesting things that are going on in regular education programs around the nation. For example, there is a district in rural Oregon that, since the implementation of P.L. 94-142, has never educated any handicapped student outside a regular school building. More importantly, the school district has never taught any handicapped pupil outside the regular classroom. All children with disabilities, no matter how severe, have been served in regular classrooms, and the support structure has been arranged in order to make that a reality. Ten years later, increasingly, we are finding professionals who are doing very similar things in expensive research and demonstration projects; but this has happened without extra federal money, and without much fanfare. It simply happened because people in that community decided that it made sense.

The other aspect of OSEP's activities that relates to least restrictive environment involves our monitoring of state education agencies. A few years ago, the Office did a thorough analysis of its system for monitoring state agencies and revised the procedures for these monitoring activities. We are now in the first cycle of visiting states and monitoring these agencies. With LRE specifically, the question we most often ask is this: Does the way the state manages special education really ensure that placement decisions are made in accordance with the law? Does the state have a set of policies and procedures that adequately ensure that local placement decisions are made in accordance with the law?

What we have been finding as we look at states often involves situations where placements are not made through the Individualized Education Program planning process but rather, placements are first made, and then the Individualized Education Plan is developed. This is a clear violation of both law and regulations. We also find that there is a great deal of confusion as to what constitutes a justification for removal of a handicapped youngster from the regular classroom setting. The law stipulates that if a handicapped student is going to be removed from the regular class, or from the regular educational environment, there must be some justification. We have found a number of justifications that relate to administrative convenience rather than to the educational needs of the child.

In monitoring a state education agency's compliance with P.L. 94- 142, we examine state policies and procedures and try to determine a structure that would truly ensure that these placement decisions are made based on individual educational needs as determined in the IEP planning process. To the extent we see monitoring as a part of the puzzle that we are attempting to solve in order to enhance the provision of quality services for children and youth with disabilities in the regular schools, then I believe that our monitoring system will help.

Conclusion

Good schools are for everybody; good special education programs are accountable for their products. We, as special education professionals, must be willing to take the necessary steps to improve and expand opportunities for full participation of children and youth with disabilities in regular education settings. We must also renew efforts to ensure that the youngsters with disabilities who are leaving our nation's schools have the support systems available which will allow them to take their rightful places as fully integrated, productive, and contributing members of the communities in which they live.

BRINGING ABOUT INTEGRATED COMMUNITY-BASED PROGRAMS FOR STUDENTS WITH SEVERE HANDICAPS

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Least Restrictive Environment. To me that is something a little bit more than a First Amendment right. Under the First Amendment, we have the right of association. We have lawyers who tell us about the Brown v. Topeka Board of Education case and a rich civil rights history. We have knowledge of the struggles of people of color to obtain rights in our society, and the struggles of women to obtain equality. We are here today to advocate the rights of people with severe handicaps; their right of association and their right to participate in the things that we all enjoy in this country.

Students with extensive disabilities profit from association with other students who have no disability. So far, the most significant documentation on the outcome is Rich Brinker's study.[1] Brinker went around the country and looked at a large number of integrated programs for students with severe multiple disabilities, and asked, "How is it that students benefit from integration, on regular public school campuses?" He collected a variety of measures. He looked at affect, at attentiveness, at rates of aberrant behaviors, at rates of skill attainment, and just about every kind of major outcome that we could think of that might be relevant to students with extensive disabilities. He then did a regression analysis -- a piece of statistical wizardry where you put in all of the things that might contribute to educational outcomes and then you examine the outcomes and try to identify which of those things seem to make a difference across various sites and students. The one thing that was very, very significant in terms of positive outcome was what we have come to call horizontal interactions, interactions among children with extensive disabilities and children who have no disabilities. The association is so strong that it has a significant correlation effect: The more associations of those types, the more interactions that occur, the stronger the outcomes.

We did a similar study in San Francisco as part of our Research Institute. We compared students with severe handicaps who were served in segregated facilities with those served in integrated environments and looked at differences on the horizontal interactions dimension. Using the same outcomes as Brinker, we also found very significant differences. In other words, the kids in integrated environments were scoring very significantly higher on those outcomes -- affect, attentiveness, skill attainment -- than those served in segregated settings.

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[1] Brinker, R.B. (1983) Evaluation of the integration of severely handicapped students in regular education and community settings. Princeton, N.J.: Educational Testing Service.

We now have two significant pieces of information: Kids do better in integrated settings, and the reason has to do with extent and nature of the contacts they have with the regular kids. Of course, there is a lot that we don't know yet. We don't know why interaction with nondisabled peers makes such a difference. Based on our data, we suspect that it has to do with motivation. There may be something about being in proximity to regular kids, having interactions, being a part of that every day environment, and doing things the way that peers do them that really heightens the level of motivation and energy in even very severely, profoundly, multiply handicapped children. That motivation enables them to attain skills more rapidly than certainly anybody would predict when they first encounter such a child.

I think we are at the point now where we can no longer question whether or not school integration is appropriate for students with severe handicaps. It is obvious that it is. The question is how we can best facilitate the educational program which occurs in the least restrictive environment.

The least restrictive environment is the regular classroom. If a student's IEP can not be carried out in the regular classroom, then the least restrictive environment is the regular school. I think that any exceptions to that have to be looked at as temporary situations and as something that needs to be alleviated as a high priority item. In other words, if we can not provide an adequate educational program for students in our regular schools, then we must set that as a target.

Outside the convention center today there is a demonstration by people who are deaf. Their argument is that the least restrictive environment for students who are deaf is not the regular public school. I hope that their position will change. I think the Office of Special Education would be ill-founded to decide that right now is the time to shut down options for parents and children with any disabilities. Now is the time to identify where the weaknesses are and where the system is not providing the best program in an integrated environment, and to go there and fix it. In the long run, integrated services work better. I would much rather see an approach taken of that order than to see divisiveness within our own community. I don't think anybody who is deaf wants to tell a parent of a severely disabled child that they should not be able to have their child in a regular school with all of the benefits that occur there. Nor would I think the parent of severely disabled child wants to tell the parent of a child who is deaf that they must go to the regular school even though the child will not benefit educationally from that placement.

Let's take a look at some state-of-the-art education here (slide). Now is this state-of-the-art education? What's wrong with this picture? Something is wrong. This child was twelve years old at the time this slide was taken. This is an "educational" program that is uncomfortably close to San Francisco. It is not a slide that was taken in the San Francisco Unified School District! This is a slide from a program operated by a county office of education called a "development center for the handicapped" which serves only students with severe disabilities.

The reason for this slide is that as part of the research project that I was talking to you about, we went into a large number of integrated programs for students with severe disabilities and took data on a number of things. We also went into an equal number of classrooms for comparable students on segregated sites and took data. While we were at this particular site, we took a few photographs, and also asked a few questions. We said, "Why is this student wearing diapers?" And, the answer was, "You know. Why do you think, Professor? The child is not toilet trained." And, we said, "Yeah, but the child's twelve years old." And, they said, "Well, yeah, but does he look twelve years old? What difference does it make?" And so then we went on, "Well, why is the child on a belly scooter? What's the function of that?" And again, "Don't you people know anything at San Francisco State? Mobility. This is how he gets around." And we thought, well geez, doesn't it seem like his motor movement capabilities are going to be somewhat regressed? There is no weight bearing, and his head position sort of focuses him on ground. You know, he can not really get around too many places with those little bitty wheels. "You mean this is really a mobility training program?" Then, we just couldn't resist the temptation to ask the final question. "Why does he have the helmet on? Is he having a fantasy about the 49ers or what?" "No, he has seizures, that's why he has a helmet on. What if he should have a seizure and fall down and break his head?" We said, "But he's only eighteen inches off the ground!" It goes on and on, you know. What you can't see in the slide is a television on in the classroom, and the staff person you see behind the child is watching Sesame Street. We ask, "Well, why is Sesame Street on?" And they said, "It's educationally beneficial, and the kids like to watch it." We looked around and no kids were watching it.

I want to show you a little bit about what we consider to be a more appropriate educational program called Integrated Community Intensive Instruction. I'll try and explain as we go along. There is another component which is new. We're looking at what we call a linear model for educational service delivery in the least restrictive environment in the state of California. Briefly, the state of California has adopted a policy on the least restrictive environment, signed by the Superintendent, and passed by the Board of Education. The only problem with it is that it's fluffy. It doesn't really have anything that you could implement in terms of systematic policy change in the state. Bill Honig, the State Superintendent, was asked for state money to build a largely segregated facility in the state and he said, "No, we no longer do segregated facilities." The county office that wanted to build the facility then said, "Well, we're going to take you to court because you don't have anything in your guidelines, rules, regulations or laws that says that you can't build a segregated facility." Honig asked his lawyers what to do to prevent people from consuming state money to build what we now consider to be inappropriate facilities. The legal office came back saying that it could be done through the state plan which deals with implementation of special education programs and placement decisions. The real nuts and bolts legal stuff comes from the state plan. So if you are going to have something that says you can't build these kinds of facilities, you are going to have to write that into the state plan. Then you can put it out and the local planning areas around the state will have to come into conformance with the state plan with their own short term plans in order to continue to receive state money. So Honing said, "Okay, give me some guidelines and let's get that stuff into the state plan and then we'll solve the problem for the future." The State Director for California, Pat Campbell, called together a group of about thirty people that included everybody who has ever spoken out on one side or the other about least restrictive environment in the state. Those people are charged with the responsibility of developing guidelines to be included in the state plan.

What I want to talk about and show you a little bit of is the proposal which CRI -- that's our institute there in California -- presented to that task force to use as the basis for the guidelines. We think that the ultimate guidelines that are passed by the group will resemble that in some way, shape or form. Whether or not it will have all of these components remains to be seen. (See Figure 1).

Now, the first thing is that I want you to notice that we put a great deal of emphasis on where education takes place in the goal setting process. You can think of this material on the board as being basically an assessment system. We teach teachers to assess environments in the school and around the school, and to take into consideration the school itself. After the age of twelve, we include vocational environments and potential work sites. (By the way, we make a cutoff point there of twelve because we have not been able to identify any research which shows that pre-vocational activities taught to a child before the age of twelve transfer to real work skills after the age of twelve, so we don't do nuts and bolts, and towels and envelope stuffing and table wiping and all of that stuff with the really young kids. Instead, we concentrate on some different things which I'll go into later.)

Figure 1.

LINEAR MODEL FOR EDUCATIONAL SERVICE DELIVERY IN THE LEAST RESTRICTIVE ENVIRONMENT

CRITICAL FUNCTIONS	ENVIRONMENTAL DOMAINS				
	School	Vocational	Domestic	Recreation	Community
Eating					
Toileting					
Mobility					
Expressive communication					
Horizontal social interaction					
Hygiene/ appearence					
Emergency/ safety skills					
Critical academic skills					

Though some people feel we shouldn't even be concerned about work until high school, we don't feel that way. We find that sometimes by the time students are in high school, there is too little time for good work training. We are determined to make sure that when each student leaves school, they will "graduate" to a program or service that will not segregate them. That is our ultimate goal. We want students to have a quality of life that is integrated. We do not want them in sheltered anything -- workshops, day activity programs, nursing care homes, or institutions.

Our goal here is to start work training early enough so that by the time we get into high school, even with kids with extensive adaptations and special needs, we are still going to be able to pass them to somebody in a coordinated, transitional plan who will see to it that they go to an integrated situation.

When you become an adult and leave school, there is only one place where you can really be integrated in our society, and that is in the world of work. Some people ask "Why should we have this work ethic for our students? Maybe we should let them recreate instead of work. Maybe we should do this. Maybe we should do that. Why do we have to be Judeo-Christian, Marxist, work, work?" I think for us it has less to do with the Marxist work ethic -- or whatever you want to call it. It has much more to do with integration, and the things that accrue with integration, the satisfaction of being along side and working with people.

To develop domestic skills, we use places like group homes. During the day, they are empty and are great places to teach domestic living skills. We also use people's apartments and houses.

For recreation, we go wherever it is chronologically age-appropriate for the kids. Thank you, Lou Brown. He gives us these wonderful terms that convey all these meanings, like "criterion of ultimate functioning." We now know that that's where we want to be next with our clients. For leisure environments, we want "chronological age-appropriate." Whatever nonhandicapped peers do in the name of recreation represents opportunities we want to provide students with severe disability.

Community is kind of the term that means everything else. Everything that isn't in those environments classified in the other columns, comes under community. It's all the other places that we would carry out instruction.

The things down the left column -- eating, toileting, mobility -- these are the basic skills that we believe that every student must have increasing proficiency in across the range of environments that you see there at the top. These are basic to all students. Some students will, of course, function higher on some skills than others. In general, however, these are the primary targets.

This creates a matrix, and you can assess the environments, and you can look at the students current level of skill in each one of these kinds of environments and sub-environments that make up those environments and so on. You will find that you have all kinds of things written in those little boxes, then you can begin to set priorities and decide to teach this first, this next, and this next; then you can draw up a lesson plan or what we call working program plan, and finally, you take off and do your education. Of course you have to come up with schedules and systems and all kinds of other things. Nothing is easy! But this is the way we go about getting started.

Expressive and receptive communication we break out separately. Expressive communication is a system by which someone will send a message to someone else. For many of our students, we find that the best system we can get for expressive communication is pictographic, so we use things like the Rebus Pictograph Series. We like that one because it has very functional, usable nouns and verbs for beginning vocabulary. It is not giraffes or other things that the kids don't have anything to do with, but usable, functional things. Also, it's iconic, meaning that the pictures look like the things that they represent, for the most part. We use various sizes -- they can come in 1" x 1" as well as 3" x 3" and so on -- so, as kids get more and more vocabulary, you can put more of them into little books. You can then adapt the little books to different environments so students can get a pretty good communication system off the ground early. When they become more proficient, you can move them to electronic communicators which become much more sophisticated. It is a system for expressive communication that we're pretty excited about in terms of use with severely disabled children. Of course, speech would be preferred and maybe we would develop speech with some of students, but if a student is generally not imitative, then we don't attack that. It may emerge later on.

Signing. We have no problem with signing for hearing impaired students. The only problem that we have with manual signing for those students who are capable of hearing is that we want very much for the community environments to be responsive to students, and to interact with them. When they want something in a store, we want them to be able to communicate effectively with someone. Unfortunately, the people out in the community are not typically responsive to manual signs. Our concern for community functioning reinforces our use of pictographics which everyone can understand.

Receptive communication is what the student understands in terms of messages transmitted to the student from us. Obviously, it would be very cumbersome if we had a single system so that you had to come back into the student through pictographs. We don't see the necessity for that in most cases, although in some cases, yes. We would like our students who are able to hear to be able to respond to spoken English, so we maximize receptive language skills in that area. The thing that is important is that these systems be highly correlated. It is very, very difficult to teach a student with severe disabilities a syntactical system, and a grammatical structure that has one form in terms of output, but then transmit information back in with a totally different structure. It would be like having someone producing German and understanding Chinese while they are immersed in an English culture. While that is not impossible for people with cognitive complexity, it is very difficult for students with severe disabilities, so we want highly correlated systems. That is why the pictographic systems that we choose are ones that lend themselves to the grammatical structure of English. For that reason, we are less excited, for example, with Blissymbols. We do not use Blissymbols because they have a syntax of their own, a structure of their own, that is rather weakly correlated with the structure that we use.

The horizontal social interactions is a major concern of our curriculum. That's the one I talked about earlier. We actually put it up here on the matrix because of the results of a study by Goetz and Anderson which showed that, in segregated facilities, less than 10% of interactions were horizontal, child-to-child interactions. Over 90% of the interactions were vertical. Furthermore, they were from an adult down to a child, and very seldom initiated from a child up to the adult. When we looked at the integrated settings, we found that three months after a student had been in an integrated setting, the percentages of horizontal interactions had increased to 40% without specific intervention. In other words, there was no inservice training, no systematic effort to try and encourage horizontal interactions. They simply spontaneously occurred at an increased rate from less than 10% to 40%. At six months, it increased to 60%. At one year, it increased to 65%, where it stabilized. We found this pattern across many settings.

We also found, that the percentage of interactions that were initiated by the student with severe disabilities to the nonhandicapped student increased significantly as well. Also, the percentage of interactions that were vertical increased in the dimension of initiation from the child to the adult. So there are all kinds of things going on that are very significant and very interesting and that's why we put this one on the chart.

Hygiene and appearance. That one has to do with being in the community. If we sent the little boy that you saw on the first slide out in the community looking like he did there, everyone would go the other way and people would be upset. So we think that the cosmetic concern is a valid one. We want to reduce the discrepancy between students with severe disabilities -- in their appearance and in their cleanliness -- and students without disabilities.

Emergency and safety skills. Obviously, out there in the dangerous nonprotected real world, we want students to be responsive to street signs, directions from others, to be able to convey information if they are lost, and all of these kinds of things.

Critical academic skills has to do with the fact that we have a range of diversity in our population. We go all the way from what we now call zero rejection students at the bottom, that means students that are severely, severely, severely, severely, severely, multiply, multiply, multiply, multiply whatever you can think of. I mean the most severely, complicated person we serve in public schools in San Francisco. The only exception to that is if somebody has a big machine that they are hooked up to to sustain their life which cannot be moved to a school site, then they are out of regular schools. The only other exception is the child who is so violent that they've already stabbed a few people by the time they're eight years old, or something like that, and with those students we do out-district placements, but they are very, very few. There are so few students in this category that we consider them not to be, that their numbers do not add up to any social policy implications. So we consider our system to be fully integrated at this point. All students with all ranges of disabilities are served in regular school.

Now, the group known as having severe disabilities but are at the upper end of the range in terms of intellectual functioning may, for example, profit from participation in a remedial academic program for computer use. We want to maximize the extent to which students have skills that are similar to the skills of students their own age who are nondisabled. So we have critical academic skills where appropriate as well.

Now, I want to talk to you about the linear model. What the linear model says is that the focal point of least restrictive environment, the focal point of placement, is the regular classroom. Regular classroom. Now I think many people will consider that to be radical. Severely handicapped kids in the regular classroom? How can you say that? Well, let me tell you how we think that should work, and I'm going to run up a little ahead of myself so you don't think I'm totally crazy, and then hopefully come back.

First of all, the process begins early. (And thank you Senator Weicker. Once again the patron saint of special education has come through with something that is going to make an enormous difference in children's lives, P.L. 99-457 which begins now with day care providers.) We want students with all ranges and types of disabilities to be served for at least a half day in a day care setting from eighteen months to three years of age. Not every child has to be there half days if a family wants to have a child there less often. However regular involvement in a day care program is important for very young children with extensive disabilities.

Public Law 99-457, if creatively applied at the state level, will allow funds to be made available for private day care providers to hire specialized staff who then join the regular staff and work with the children with extensive disabilities. Now those of us who have dealt with day care know that there are many problems in the whole day care system for kids with no disabilities. Consequently, common reaction is to ask how we can put kids with severe disabilities in those lousy day care programs? I think that maybe this is one way that special education can provide some demonstrable service benefits to general education. I think day care now will start to be recognized as educationally beneficial. It will have a spread of effect to improve the entire day care program.

The next phase of the linear model is preschool. We want our students passed from mainstream day care provision into regular preschools. From ages three to five or six, students with severe disabilities can attend the same classroom as kids without identified handicaps. Again, P.L. 99-457 money is available to bring in specialized staff.

Going up the grade ladder, we want mainstreamed kindergartens. Students with extensive disabilities can have their kindergarten experience in the same kindergarten classroom the kids with no disabilities have theirs. However, kindergartens in California right now are averaging 28 kids in a class. Our model calls for allowing up to 10 children with IEPs to be in a regular kindergarten class. Now if 10 children with IEPs are in a 28-child class, that means that it displaces 10 regular kindergartners which means that there will have to be another class formed and another teacher hired and so on. Cost is involved and that is something we are working on. While everybody sees the benefit, people are reluctant to spend the money. However, we are looking for some ways that cost can be traded which might make it feasible. We think the model may have a great deal of potential. The class is team-taught with a regular kindergarten teacher and a special education teacher in the same classroom jointly conducting the entire program.

What happens when first grade equivalency comes around? You know, the first grade is different. The desks are lined up in front of the teacher, and kids get group instruction for academics, and there begins to be pressure for achievement. There is less time for kids just to be kids. Should students with severe disabilities be in that regular first grade classroom? or second grade room? I think that what we have to do is provide the educational program that is most appropriate to the individual child. For those portions of the day when a child will not benefit from academic instruction from the front of the class, that child should be somewhere else doing things that are directly beneficial. However, it is important to provide opportunity for horizontal or student-to-student interactions. We propose that we get away from the idea of a special education classroom and get into something a little different that we call specialized instructional unit or SIU. An SIU will have its own designated space, but it also has a great deal of permeability. Many students with severe disabilities will be out of the room for much of the time; lots of regular kids will be in that room for much of the time. The SIU is a team venture planned and carried out between the special education teacher in charge of the SIU and the regular teachers who would have a child in his or her classroom if the child had no disability. That beginning process of moving a less total mainstream situation is phase two, or what we call integration. Integration continues up to about fifth grade equivalency in our model.

We are trying for a merger of regular and special education resources. We want the regular teacher to be involved and be part of the IEP, to encourage kids without disabilities to participate in the program, and to have the student with the severe disability in his or her regular classroom for those portions of the day which are appropriate.

In order for successful integration, it is important to be in the local school. It will not work in a development center, or in a side- by-side program where half the kids have IEPs and half do not. Our linear model calls for placement of all students with disabilities in the regular school and at the local school -- the school the child would attend if he or she had no disabilities. If such a home school placement is not possible now -- the school is not accessible yet, the principal hates kids with disabilities -- then we think the only other acceptable placement in general would be the age-appropriate school nearest the local school, in accordance with the proportion of disability in the community. Not a big special education program there, but yet is accessible and the child is able to attend that school. So, those are sort of the bare bones of the linear model so far.

We find that in their relationships with students with severe disabilities, regular students tend to sort themselves into two categories. Certain kids seem to like to instruct or teach peers with severe disabilities; other kids are less "didactic" and are just friendly. We call the one group peer tutors, and the others special friends. There seem to be some interesting differences.

Kids like the little girl with the little boy who is deaf/blind, profoundly retarded, multiply handicapped and so on here. This is a preschool, and this relationship that you see here formed spontaneously. It was not encouraged. The kids, when you mix them together, just start forming their own set of relationships. The regular kids are not prejudiced. They do not discriminate. They're curious. They want to know why this kid can't do this? Or why he can't do that? Can they play with him? Will he ever talk? We let those relationships form and then start to intervene by fostering certain things once they have already formed. This little girl comes over and sits beside the boy with disabilities. She is not trying to teach him anything. These little kids who want to do peer tutorials sort of just do it on the spot.

(There is a very depressing study in this area, by the way, which I'll mention here. One of my master's students, Pat Silby, did a study in which she compared peer tutors to teaching staff on some skills. The tutors did better on several social skills and on a couple of recreation skills with nine-year-old kids. That to me is just absolutely amazing.)

There is some controversy in the field. Some of the people in education of students with severe disabilities feel that peer tutor relationships are patronizing, that they are more vertical than horizontal in their interactional nature, that they are artificial relationships, and that we should not foster them, but rather we should encourage spontaneous special friendship relationships and not expect little kids to be teaching each other. I'm not one of those. My position is that tutoring is normal: Tutorials occur in regular education. They seem to work very, very well. Any of us who are parents know, that when we sit down and try to get our seven-year-old's attention to do his homework, he will go, "Yeah, yeah, yeah." Yet when another seven-year-old comes along and starts to tutor, he or she will have the kid's attention, and learning can take place much more rapidly there. Sometimes kids break through areas where adults can not. That's one argument for encouraging tutor programs.

The other argument is that we desperately need staff in this business. I'm going to tell you in a minute about community intensive instruction. If you're going to do instruction in the community, then somebody has to be with them. There just are not enough paid professionals to be able to do that; so we need peer tutors to be adjunct teaching staff -- especially since Pat Silby showed us they can sometimes do it better than the teaching staff.

Peer tutors come out and assist in helping children get transported. Transportation is our number one problem in integration in California. If we have a segregated transportation system, then it works against the goals of integration. It is also incredibly expensive. In Los Angeles, we did a little study that showed that we could have each child with a significant disability chauffeured in a Cadillac to school and home for less than the current transportation bill for that child paid for by the county office of education. When there are legislators rebelling against the cost of special education stuff, statistics like that really don't help at all. We think we should integrate transportation. We think that the time has come for big yellow school buses with hydraulic lifts. Let's have the kids go to the regular school on regular buses. We can pay for aides; that would be much less expensive than that little yellow van and that contracts for those special routes. One of our goals in San Francisco is to have a much more integrated transportation system. We're moving now into the phase of integration. Jose Ortega School was the first school in San Francisco to be fully integrated. In many ways, it is an inaccessible school. It is built into a hill and has steep slopes and many steps. The reason we picked Jose Ortega was that the principal there really wanted to try this out. He was one of those people that says, "Let's see if this works. If it doesn't, then you guys at the university will have the usual egg on your face and we can go back to the way things were. The kids can go back to the Development Center." We had some parents that really thought it was a good idea. They heard Lou Brown say it's time to do this in here. So we set it up. We got a federal grant for Project REACH, and things went very, very well. The only problem was that we had a disproportionate number of kids with very severe, profound, multiple disabilities in wheelchairs. Now we make groups more heterogeneous which works much better. An instructional unit might include a child or two with autism, one or two kids with severe or multiple handicaps, several students in wheelchairs, and then some other kids with other types or combinations of disabilities. That is a more workable alternative than putting all the wheelchairs in one unit, all the students with autism in another, and so on. (Putting all kids with autism together creates a very difficult environment for both students and the teacher.)

Of course, there were worries about whether sometimes fragile students with severe disabilities could survive on the regular playground with the hurly burly of balls flying everywhere and students running and yelling and screaming. We did a study by looking at the number of accidents that required the attention of a doctor, comparing hundreds of kids in segregated facilities with same age kids in integrated environments, then simply totaling up the number of incidents. We found a significant difference in favor of more medical admissions in the segregated placements than in the integrated placements. That was a surprise. We thought probably integrated environments like this would be more dangerous and kids would be hurt. It simply did not happen. The reason it did not happen is interesting. We found that, in the segregated environments, medically fragile children were in close proximity to children who were very aggressive or prone to episodes of violence. The incidents that happened with injuries in the segregated facilities happened because of those kinds of contacts. In the regular schools, we didn't have that. What we found, in fact, was that on the regular playgrounds, some kids would spontaneously take some actions that would be somewhat protective of the kids who were medically fragile. That was very interesting and helpful to find.

We do some inservice training. We do not typically go to a regular school that has never had students with severe disabilities and have our kids "appear" in the fall. We have done that and it can work. However, that strategy can also create problems. Also, the older the kids get, the more they get like their parents -- sort of discriminatory -- so they will move away from our kids, or they will call them "retards", or stuff like that. There are things that are upsetting that happen if you do no preparation at all. We favor doing a little bit of preparation. We had a staff member who went to a school, did some Kids on the Block- type activities asking the little kids what it's like to be disabled, and gave them blindfold experiences, a wheelchair experience, and a deafness experience. We found that by preparing the kids at a school before our kids get there, their reception is much warmer and we had fewer problems.

We also favor an inservice for the regular teachers. We tell them what we expect from them, show them what we can offer them, and try to establish some understanding and mutual respect.

By the way, when I say, "we", I'm talking about a partnership between the university and the district. We do things together. The special education director for San Francisco schools and I team up. We write grants and do that stuff jointly. Our teaching faculty do lots of the training of our teachers out in the schools and practicum experiences. It is a partnership arrangement. If you don't have something like that in your community, I think you might want to really try and start it up. When the university and the district get together, things happen that would not have been possible by either group working alone.

We do inservice with parents. The key to having parents overcome their fear of integration and mainstreaming is not the lecture but the opportunity to see a good integrated program. If you want parents to be on your side and move into less restrictive environments, you have to set up an example, take the parents to it, and show them. That's all we did in San Francisco. It took a very short amount of time. We set up a model. We brought everybody in to look at it -- made a fish bowl out of it -- and, as soon as parents saw kids that were like their own children and what was going on in those environments, they said, "I want this for my child and I want it now." In fact, the district had a horrible crisis at one point. It had its segregated facilities teetering on the balance of bankruptcy. Everyone was demanding integrated placements; there was not enough space or enough principals whose attitudes had been broadened. Everybody wanted integration all at once and the district could not pull it off. Fortunately, we lived through it! The last vestiges of the segregated facility in our town is a side-by-side high school program. It is there because we felt that the parents of those students, if they wanted a more protective environment, should be able to have it. About forty percent of the high school is students with disabilities; that disproportionate number does not fit at all with the model I've been talking about; however, we're not going to shut it down. We don't want to shut down the school for the deaf in California, because we are not prepared at this point to provide services to meet the needs of the deaf population and so the school for the deaf should be an option. However, when we create alternatives that are integrated and of the type we're talking about here, almost all of the people who were in those other segregated environments will want to leave them. They will move to what is obviously a much better program.

We have very good public transportation in San Francisco. That helps us out. City buses go to the important places, have ramps, and they work so our kids can travel to work sites.

Phase three of the linear model is community intensive instruction for students who range in age from about 10 -13 years (or 5th through 8th grade equivalency). Students spend less time in the classroom and the school and more out in the community. Where we can, we bring peer tutors off campus and have them work with our students in the community. We've been very good at doing that in junior high school and very good at doing that in high school. It has been more difficult to do that in elementary school.

At age twelve we start work training. We have, for example, a student who has a mail delivery route in and around the school. That is her first targeted vocational objective and she is assisted by a peer tutor. We do cooking skill things in group homes, very near the campus, during this community intensive instruction phase. Here, we're at a junior high school. This is just a hallway shot, but the thing that's neat, when the regular kids got used to our students being there, they treated them just like everybody else. The junior high kids will come running up up behind Jose here and jump on his wheelchair and goose the throttle and get a free ride down the hall. Jose loves it. It works very well.

I wish I had time to tell you this story. These kids are special friends, but they had to overcome the objections of their parents. The nondisabled girl wanted to take the severely disabled girl home and have her spend a Saturday night with her at her house because this friendship had formed and they enjoyed each other's company. But the parents didn't understand. They said, "Why? What? It doesn't make sense." The nondisabled girl almost ran away from home, almost became one of those statistics. But the parents got together and worked it out. To make a long story short, kids can become very good friends. Disabilities are not a barrier to that.

This is high school and the introduction to phase four, transition. Phase four begins when the student moves into the high school environment. We are very concerned here with making sure that we have job training to a very heavy extent in the curriculum. We use what we call a vocational rotation training strategy. We have job training types set up around all the high schools that we are operating out of. By the way, at this age, we do nothing in the classroom. It is all based in the community and on the school campus. Students rotate through the job types. We look for a match between an individual skill and a particular job type. One of the very important things that we've discovered is the individual's preference for a job type. When we can discover a match between a job type and a preference, that's the point at which we get the post-school provider agencies really geared up, and we start looking for a job placement of that type upon graduation. We feel that our students should graduate at the age that all high school students graduate. They should graduate as close to age 18 as possible.

We will only hold onto them if we cannot make that transition to an integrated provider afterwards. We can hold onto them up to 22, but we don't want to do that. That is a change in philosophy. The districts made a decision that it is better for the student to make the transition when it is age-appropriate than it is to continue to consume P.L. 94-142 funding.

If you are just starting on community intensive instruction in your community, you want a safe place, like an island. You know it's scary out there with our students. Who knows what they might do out there! You want a laundry. It's a perfect, safe first place to run to. You can teach useful skills in the laundromat, and you won't be the only weird people in the laundromat. Mom & Pop stores are also very, very good. The trick in those stores is to make sure that the proprietors don't do everything for the student.

Painting. We tried one student in so many different things, and he was adequate. He always managed to meet criterion. We got him placed with a painting contractor, and he just absolutely went wild. This was clearly what he was meant to be. It went so well.

I want to conclude with Fred. Fred was in an experimental community college program that we set up. The final stage of our linear model is integrated work and supported life. Integrated work and supported life. Those outcomes are not the primary responsibility of educators. They are the responsibility of you vocational rehabilitation people, developmental disabilities services. Integrated work and supported life is their end of the transition process. For students who need substantial continuing skill development before they can hold down a part time job, the community college is one vehicle. The program would be an extension of the same things we did in the high school program, but on an age-appropriate campus.

Fred was in this program. He had been in a nursing home. Nothing had been done for him. He was in a crib with bars on the sides, special feeding, catheters, and the whole thing. It was really, really pathetic. This program got all of those tubes off of him, got him slowly upright, gravity had to work slowly in his case because he had been left on the side too long. We think that if you look at the shape Fred is in now, he obviously really enjoys this community college experience. He is very energetic and acquired all kinds of skills. He has hardly any range of motion, but somehow he got it to where he could hit that switch and turn on the tape recorder and listen to music. He also uses switches to call somebody, and control his environment in other ways. Think of what Fred could have been if we'd gotten him at preschool, challenged him, kept him with people, kept him upright, and kept providing interaction and contact.

The future is beginning to look pretty good. I think LRE is very important for people like Fred; that's what we're all about.

Quality Indicators Of Exemplary High School Programs For Students With Severe Handicaps: Knowing When You Are Doing A Good Job

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I am very happy to be here, and even happier that all of you are here. I am delighted to live in a state whose constitution advertises "a system of education equally open to all." A system of education equally open to all. That is a very important commitment made in Indiana, not in 1986, but in 1846. On one hand, I'm happy to say that we are still working to make that promise a reality. At the same time, I am sad to say that we are still struggling to make that promise a reality. We are still struggling to guarantee to each child with a severe disability the opportunity to receive necessary educational and related services in a setting that is least restrictive of his or her interactions with nonhandicapped peers.

I want to spend some time this afternoon talking about a fairly practical question. I hope that after listening to Tom Bellamy, Wayne Sailor, and others this morning that you are excited about the opportunity offered by school integration for people with severe disabilities. I hope you have some sense that it is all very possible. The practical question that I want to address this afternoon: When we set out -- today or tomorrow -- to "do good," to deliver good services to students with severe disabilities, how will we know whether or not we are doing a good job?

I think for a long time there has been some general professional agreement about the values or qualities that should characterize a good program for people with more severe handicaps. We advocate integrated school programs because we think the business of schools is to get students ready for life in their community, and the communities for which we are getting them ready are universally integrated. They are wild and crazy places, so it is quite appropriate for schools to reflect that heterogeneity. We advocate the quality of age-appropriateness. We think good programs ought to be age-appropriate because it is the job of schools to reduce discrepancies between kids with disabilities and their nonhandicapped peers. We talk about the importance of programs being community-referenced. Community-referencing is an extremely important value because we cannot get students ready for their communities by training only in the classroom. We talk about the importance of looking to the future, of being future-referenced in the programs that we design, because we anticipate progress and change in adult service systems. Getting people ready for the post-school future that is typically

40

available now is not particularly difficult; it is not a charming future. Nonetheless, we do want to be future-referenced because we anticipate great changes in those services, and it is important that students are ready for those changed services. We say programs ought to be effective because students deserve effective programs: If programs are not effective, why should we even bother? We advocate parent involvement as a basic feature of a quality program. Parents must be partners in the educational process because of the tremendous opportunity cost that is involved in decisions about educational goals: When we decide to spend time teaching students one thing, it means we cannot spend that same time teaching something else. Any decision represents a very serious opportunity cost. Schools and educators should not make those decisions without the input of parents.

I think these six qualities are fairly self evident. I don't find them terribly controversial; the field has accepted them for some time now. There is a great deal of agreement at the level of verbal behavior. However, there is, in fact, tremendous slippage between what we believe and what we practice. What we say, is not often what we see in school settings.

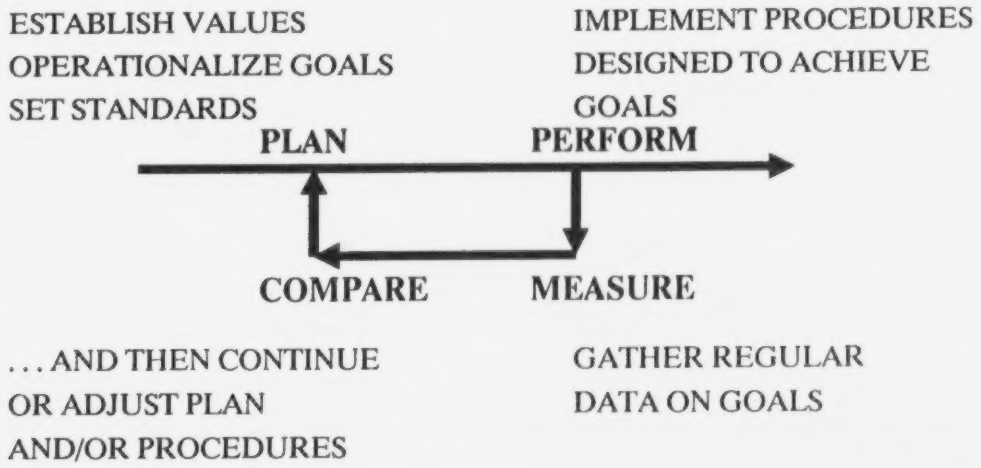
Consider the situation where people say, "I believe in community training," and what we see is a group of 10 students with severe disabilities going out somewhere once a week, doing something, whether they need to or not. We hear people say, "I believe in age-appropriate programs," but then we see high-school-age students in a class whose walls are decorated like a preschool. We see high school students in a classroom that has furniture that is totally foreign to a high school classroom setting: cut-away tables, overstuffed rocking chairs with the stuffing coming out, exercycles, and pinball machines. We say, "I believe in age-appropriate settings," but the setting in which we serve kids does not really look very age-appropriate.

Many people say, "I believe in parents as partners. I believe in parent participation," and then we ignore parents' wishes for their sons or daughters to get job training in the community because, in our professional wisdom, we know that kids aren't ready. We believe in integration and then we put 40 students with severe disabilities onto a single middle school campus, despite the fact that there might be several middle schools throughout the community.

Though our verbal behavior is quite good, when there are such discrepancies between what we believe and what we do, I think there is a major problem. A large part of the problem -- the discrepancy between what we believe and what we do -- derives from the fact that as special educators, as parents, as administrators, we have not always taken the time to define what it is that we really want. We haven't taken the time to develop behavioral objectives for our classrooms or for our programs. I believe in integration, but what is it? I believe in parent involvement, but how much is enough?

It is ironic that we have not taken time to define what it is that we want or to build behavioral objectives for programs, because as professionals, we advocate behavioral objectives and data-based decision-making for the students that we serve. Teachers learn to define observable behaviors. They describe the conditions under which they expect performance. They establish criterion that are going to define success. They take regular student performance data, and they change instructional procedures when objectives have been mastered or when students fail to make progress. We train teachers to develop behavioral objectives so that they can measure student progress; unfortunately, we rarely do the same for our own programs. The fact is that we could use the very same strategy at a systems level. Behavioral objectives are not only for kids. We can use that same strategy at a systems level to help us change, to help close the gap between what we say and what we do. We could establish measurable outcomes for districts, for classrooms, for parents. We could set standards that will define a "good job" or when we have achieved our intended effects. We could monitor the status of our goals and then adjust resources and activities as necessary in order to get where we want to go, in order to realize our stated outcome.

Figure 1.



That process of setting objectives, of performing, of taking data, and adjusting programs is a strategy that can be used effectively by local districts, by building-level leaders, by classroom teachers, and by parents. What we could do is well illustrated by the concept of a feedback loop, a model that comes from engineering and human engineering.

Typically, when we decide to change the educational system or introduce an innovation, all we do is plan. We say, "I want integrated services," or "I want effective schools." Then we set about performing: We do all sorts of things that we hope will get us good integrated programs or make schools more effective. Things might go very well for awhile, but then it all fades off into nothingness. Or we might commit ourselves to a course of action, implement that plan, find out that it really isn't what we wanted after all, and just drop it. This is a common course in the lives of educational innovations. There are two important steps that we leave out: the measuring -- taking data on ourselves to know how well we are doing -- and comparing what we have done with what we wanted to do. We frequently ignore those steps, and they are the ones necessary to guarantee accountability and to ensure effective and responsive decision-making.

What is this business of feedback loops: establishing our values, making them measurable, setting standards, and taking data? What do those elements of planning, performing, data collection, adjustment and decision making have to do with this conference on least restrictive environment for students with severe disabilities? In order to answer that, I am going to make a language shift. I will stop talking about least restrictive environment, abandon the special education jargon, and use some words that I think are much more familiar to regular educators. I want to talk about "effective schools." I want to think about least restrictive environment in the way that Tom Bellamy introduced it this morning. It is not only a provision in the regulations that addresses where students with disabilities should receive services; LRE is very closely aligned conceptually with the notion of effective schools and a commitment to excellence in education.

Some of you may have looked at that literature on effective schools; some of you have not. It is actually quite an interesting literature that tells us many things. Two propositions that recur throughout the literature on effective schools are the importance of clear goals and the importance of high expectations.

According to the literature, effective schools have goals and objectives that are developed, known, and accepted by parents, teachers, and the community at large. An effective school program is only going to be effective when the goals -- when the intended outcomes of schooling -- are very clear. An effective school is a school where building administrators have high expectations that teachers will implement best practice, and where teachers have high expectations that students will learn target materials. An effective school is one where the intended outcomes are clear, where people have aspirations, where people have expectations that things will go well.

If we were talking about our goals for people with severe disabilities, could we answer the question, "What are the intended outcomes of schooling?" In order to decide whether we are providing effective services, in order to decide whether we are doing a good job in implementing least restrictive environment, we really need to know what it is that we are after.

There are, of course, many ways to answer the question "What are the clear goals of schooling for students with severe handicaps?" I am going to take the easy way out and use the set of answers that Tom Bellamy offered to all of us this morning. In his assertion that schools should be accountable for their outcomes, he really talked about the goals of schooling, and suggested to us all that the goals of schooling for students with severe disabilities were three: that they graduate (1) with a job, (2) with a place in the community, a nice place to live and a place as valued community members, and (3) with friends, with a social network to help support them on the job and in the community. That seems a very simple set of statements, but I think it is important, both for what it says and for what it does not say.

If we hold that the clear goals of schooling for kids with severe disabilities are that they have a job, a place in the community, and friends when they leave school, we neglect some traditional objectives. This set of outcomes -- this set of clear goals -- does not say that we are preparing students to be good residents of an institution. It does not say that what we are about is getting kids clever in the classroom. It does not say that what we are about is improving student performance on standardized measures of intelligence or achievement, or on scales of normal development. It does not say that what we are about is helping students "realize their potential." It says something much more concrete. It says we are after things that you and I know about: A job, a place in the community, and friends.

What this set of statements does imply, to me at least, is that the vision or the goals of schooling for students with severe disabilities are very much like goals that we have for ourselves. I want a good job. To me that means that I make money, work with interesting people, have benefits to my employment, opportunities for advancement, and job security. I also want a nice place to live. I want a roof over my head, but I want the best roof that I can get. I also want the recognition that I am a valued person in my community. I want and need friends. Nobody makes it in this world by themselves. It is important that I have friends that are not paid care givers; I think that that is important for people with disabilities as well. A simple statement of clear goals highlights the similarities between those of us without labels and those individuals with severe disabilities.

44

Unfortunately, we are not doing a very good job of realizing these seemingly simple goals. People with severe disabilities are socially isolated. Parents in general report that their sons and their daughters have no friends. They have no social network beyond families, or people that are paid to care about them, or other people with identifiable handicaps. We are doing poorly on the friendship goal.

Except in very few communities, people with severe disabilities graduate from school to live in large group homes, or to live in nursing homes, or to live with their families for extraordinarily long periods of time. We are not doing very well realizing the goal that students with severe disabilities will leave school and live independently or with support in small, community-scale, family-like arrangements.

We are not doing very well realizing the goal that students with disabilities will graduate to good jobs. There is very high unemployment among special education graduates. Wages are low. Typically people with disabilities are segregated in the work place. It is this goal more than the others where we are making some progress with the recent supported employment initiative. Altogether, however, if we hold as our goals a job, a place in the community and friends, we are not doing a very good job. Interestingly, we only know that we are not doing a good job because we started to think about what our job is. In order to know whether we are doing a good job, it is incredibly important to know where we are going.

I need to check with you and make sure that these three things are OK. When you think about the goals of schooling for people with severe disabilities, does a job, a place in the community, and friends make sense? Now I know there are some skeptics in the audience who are saying, "Right, there are kids that I know who are never going to work. There are kids that I know who don't have a prayer of finding a friend. There are folks that I know who don't stand a chance of living with support in a small community residence." I don't want you to be "realistic." I want you to have high expectations because effective schools are programs that have clear goals and high expectations for achieving those goals. What do we want as a nation and as a collection of individuals? When I was in grade school we had a very "unrealistic" goal: To put a man on the moon. Somehow, because that was a clear goal and a high expectation, it got done. When we put our energy behind a vision, things happen and the goal is realized. As you think about clear goals, I want you to have high expectations: a job, a place in the community, and friends.

Let's talk for a second about what it will take to achieve those goals. What do we know that schools can do to increase the probability that kids will have jobs, have a place in the community and the skills to maintain there, and that they will have friends -- people who care about them, who are not paid to and do not have to? Some of what we know comes from research, and some of what we know comes from logic; there is a bit of a mix.

A job. What can we do that will increase the probability that students with disabilities will have jobs? The single best predictor of whether the students in special education will be employed upon school leaving is whether they had a paid, part-time job while they were in school. This may not be surprising, but it is a fact. Kids who have had paid, part-time employment during the school years are more likely than their peers to be employed upon graduation.

Access to the resources of vocational education during high school years is also something that increases the probability that the kids will be employed upon graduation. Giving students a work history -- a series of work training opportunities that sample the various kinds of work available in the community, and that generates information about the nature and level of support that they will need upon school leaving -- is something that increases the probability that they will be employed upon graduation. Something else that increases the probability that kids will graduate to jobs is the availability of employers who are interested in hiring folks with disabilities. Another obvious variable related to success in securing and maintaining a job is the availability of on-going support as necessary. And, strangely enough, a variable that affects whether or not students find jobs and maintain those jobs is whether or not they have friends. It turns out that while we are doing a fairly poor job on the goal of employment at the point of school leaving, those students who do graduate from special education to employment tend to find their jobs, not through the wizardry of vocational rehabilitation counselors or MR/DD case managers. Instead, nearly two-thirds of the students who graduate with jobs find those jobs through a self-family-friend network. They find work the same way that you and I find work: connections. Helping get kids connected -- helping them build that network -- during the school years is, in fact, something that we know will help them find and maintain employment after school leaving.

A place in the community. What do we know that would increase the probability that we will reach the goal that students graduate to a place in the community with the skills to stay there? One of the things that we can do is teach kids what they need to know, not necessarily what is easy to teach. We cannot go on teaching them the stupid stuff that we have always taught them, but must teach them to deal with the complexity of the community. One of the things that we can do to enhance the probability that we will realize this goal is to teach kids where we want them to perform, not only in the classroom, but out in the community. We will increase the probability that kids will have a place as valued community members and a place to live if we change the attitudes of neighbors, and if we educate the nonhandicapped community. We increase the probability that kids will have a place when they leave school if we build necessary program supports. And, strangely enough, we will increase the probability that students with severe disabilities will be successful community survivors if they have friends. Studies about the successful community maintenance of individuals who have left institutional programs highlights the importance of having an advocate in the community, having a friend. The single variable that most predicts successful maintenance in the community is the availability of an advocate.

Friends. While it does not make sense to put on a student's IEP, "Janet will have four friends and one best friend," there are things that educators and parents can do to increase the probability that kids will become part of the social fabric of their school, and will have a social support network. The three classes of variables that we can manipulate are (1) opportunities for interaction, (2) an image of similarity, and (3) the competence of kids at initiating and sustaining social interactions. These three variables are what the research literature tells us affect in the probability that students with disabilities will get connected to other kids: opportunity, image, and competence. One of the things that we can do is serve students on integrated school campuses. That increases the opportunity for folks with severe disabilities to know and be known by allegedly normal kids. Serving students with severe disabilities on regular school campuses also contributes to an image of similarity. We can locate our services on campuses that match students' chronological age. We could be age- appropriate in the services that we provide. Why? Not because serving a high school age student on a high school campus is going to raise his or her IQ, but because it is going to create a very different image to those allegedly normal student body members: It creates the image of similarity and it minimizes differences.

We could also serve kids with disabilities in their part of town, not in a special education magnet program or in a centralized cluster program, but as close as possible to their home school. Serving students in their part of town, in their own neighborhood, provides opportunities for the development of long term relationships and provides students with severe disabilities the opportunity to grow up with peers in their neighborhood. We could also increase the probability that kids with disabilities will have friends, both now and when they leave school, if we do systematic and structured training of social skills and if we create regular supervised opportunities for people with disabilities to interact with their allegedly normal peers.

We know a great deal about how to get kids jobs, how to help kids learn what they need to know to be competent community survivors, and how to establish them as part of a social network, but we don't do it often enough. What I want to

47

do is present a prescription for this problem. I'm going to write a prescription for each of the groups that I think are represented in the audience: district administrators, building administrators, teachers, and parents.

District administrators. I want to give those of you who are district administrators some ideas about the kind of things that you could look for as you do your job. I'm going to suggest to you some standards that support the clear goals that students with severe handicaps graduate with a job, a place in the community, and friends.

Sometimes the standards or elements are simply questions to which you answer yes or no. Do I have it? If yes, pat yourself on the back. If no, put it on your list of things to do tomorrow. Other items allow you to be a little bit more empirical and establish target levels of performance, or more specific goals.

If you were a district administrator with clear goals and high expectations for kids with severe disabilities, what would your task list look like? First, you might ask yourself, "Is there a mission statement for the programs I oversee?" Why? Not because three paragraphs of writing is going to change the world, but because clear goals and a mission statement that define what school is all about for kids with severe disabilities is an important bit of leadership and an important reference point when it comes to allocating resources. If you are a district-level administrator, a first step may be simply putting in place a mission statement with clear program goals.

As an administrator, ask yourself, "Is there an integrated opportunity for all students, even students with the most severe disabilities? Does each student have an option to go to an age- appropriate regular school campus?" If yes, pat yourself on the back. If no, put it on your list. Realizing the least restrictive environment provision of the law will require an integrated option for all students.

As a district administrator, ask yourself, "Are students attending school in their own community?" Why? Because of the importance of friendships and the need to create opportunities for kids with severe disabilities to get connected with their allegedly normal peers. It is possible to centralize program administration but decentralize services so that students can attend school, not in the community next door, but in the community in which they live. To know how well you are doing, look at the number of students with severe disabilities who attend their home school. Set a goal to increase that number next year. Ask yourself, "Do all schools in my district share the wealth and richness of having a class of students with severe disabilities?" If one school is lucky and wins all the classes or programs, you have identified some important changes you might make.

Ask yourself, "Are kids served in age-appropriate buildings? Do I have those integrated opportunities for students at the elementary age, in middle school or junior high school, and on high school campuses distributed throughout my district?" You might even ask the very interesting question, "Are kids that are 18 to 21 served in age- appropriate settings? Are kids that are 18 to 21 served on community college campuses or served on the campuses of institutions of high education that are attended by nonhandicapped folks of the same age?"

As an administrator, ask yourself, "In each of my buildings, do I have the right balance or, in special education jargon, the 'natural proportion?' Look at each building, look at the number of students identified as needing special education. Are there some buildings that are super-saturated with more than 10% of the student body is identified as handicapped? When you find such buildings, work to change that balance. Strive for buildings where no more than 1% of the student body is severely handicapped.

An administrator who wanted to do a good job might ask, "Do staff have the right roles and responsibilities? Have I defined teacher and related service roles that will actually help me get where I want to go, that will actually facilitate students having a job, learning the skills to survive in the community, and having some friends?" Look at district role definitions and make sure that in the basic job description you communicate high expectations: That teachers will implement best practice procedures, that teachers will not just teach kids tricks in the classroom but will train individuals with severe disabilities in the community, that they will recruit and analyze work training opportunities in the community, that they will initiate and manage programs of peer tutoring or peer advocacy. Job descriptions are important, not because they make kids smarter, or give kids more friends. Job descriptions are important because they can eliminate an excuse that is often used for not doing what we should be doing.

As you revise those job descriptions, you might think about the roles that you have defined. Do role definitions support best practice? You might want to change some of your teaching staff, or convert some class room teaching staff into vocational trainers, or community trainers. You might want to designate some of your classroom assistants as community training aides or vocational training aides. You will probably want to review the job descriptions of your related service personnel -- occupational and physical therapists, speech and language therapists, adaptive physical education specialists -- to make sure that it is clear from the onset that their job is, not only direct service to students, but consultation with teachers, and actual training on the job and in the community.

You might consider provisions for flexible working hours. Remember those paid, part-time jobs that so well predict successful employment after school leaving? Many of those paid, part-time jobs for allegedly normal kids occur after school and on weekends. You might want to consider roles with hours that are different than the standard teaching hours.

As a district administrator, you might want to look at your curriculum guidelines and again make sure you have on paper a focus on student outcomes and that your curriculum commitment says, "We have a curriculum that is taking us to the point where kids have jobs, have a place in the community, and have friends."

A successful district administrator will have a high level of involvement by community businesses. You may want to set a standard for yourself about the number of community businesses that participate as community training sites or as work training sites. That is one way to measure the level of community support and involvement.

Good local inter-agency collaboration between schools, mental health agencies, JTPA, and vocational rehabilitation is something that can be achieved by administrators. Those are relationships that you can initiate as a district administrator that will, in fact, increase the probability that kids will graduate with appropriate supported employment options, and appropriate supported living options.

One of the things that you can do as a district administrator is to follow-up your graduates. Do regular follow-up studies of school leavers to see whether they are going where you want them to go.

As a district administrator, you can encourage the setting and monitoring of standards for building level activities and for classroom level activities. You can make sure that some of the values trickle down in a very systematic way.

As an administrator, you can make a commitment to improving students' life style; not just their scores on the standardized measures of achievement or development, but actually committing yourself to make a difference in the quality of life that students with severe handicaps enjoy. Indeed, by saying the goals of schooling are a job, a place in the community, and friends, you started to attend to issues of lifestyle rather than issues of stuffing more skills into students' repertoire.

As an administrator, you can make sure that you have in place policies and procedures that let teachers and building principals do what they need to do: Train off-campus, involve peers as tutors, spend money for nontraditional items.

A final thing that you can do as a district administrator is to collect and pass forward to your state department information about the kind of changes that may be necessary in state regulations to facilitate doing a good job. Do you have regular reports up to your state director of special education?

If you are a district administrator, there is a lot that you can do to increase the chances that students with severe disabilities will have jobs, a place in their community, and friends. (The suggested standards for district administrators are presented in Table 1).

Table 1.

DISTRICT ADMINISTRATION

- CLEAR PROGRAM GOALS AND MISSION STATEMENT
- INTEGRATED OPPORTUNITY FOR ALL STUDENTS
- STUDENTS IN THEIR OWN COMMUNITY'S SCHOOLS
- STUDENTS ATTENDING SCHOOL IN THEIR PART OF TOWN
- STUDENTS IN AGE-APPROPRIATE BUILDINGS
- NATURAL PROPORTION OF SPECIAL EDUCATION ENROLLMENT IN BUILDINGS
- REVISED ROLES AND JOB DESCRIPTIONS
- EMPHASIZING "BEST PRACTICE"
- NEW ROLES
- FLEXIBLE HOURS
- CURRICULUM GUIDELINES FOCUSED ON STUDENTS' OUTCOME (JOB, PLACE IN THE COMMUNITY, FRIENDS)
- INVOLVEMENT OF COMMUNITY BUSINESSES AS TRAINING AND WORK TRAINING SITES
- LOCAL INTERAGENCY COLLABORATION
- STUDIES TO FOLLOW UP SCHOOL LEAVERS PROGRAM STANDARDS ESTABLISHED AND MONITORED
- FOCUS ON STUDENT LIFESTYLE
- ADMINISTRATIVE PROCEDURES TO SUPPORT COMMUNITY TRAINING
- DATA TO SEA RE: CHANGES NECESSARY TO SUPPORT

Building administrators. If you are a regular building administrator and you know nothing about special education except that you have "won" some special classes, there is also a great deal that you can do to make a difference to students.

One of your first decisions is where you are going to locate that class of kids with severe disabilities. If you care about students having friends, that means you should attend to opportunities for interaction and the image of the classroom. That, in turn, means that you do not want to put the class of kids with severe disabilities in the portable unit on the athletic field. You do not have to put them in the last room, in the last hall where kids smoke and do drugs. You do not have to put them in a room under the stage. You can put the classroom of kids with severe disabilities in a nice, high status, central location in the building. You can.

As a principal, you have control over what you call the class, and what you call the teacher. This is, again, a matter of image. You can call them "the mod squad." You can call them "the severely handicapped class." You can refer to "the severely handicapped teacher." All of these are rather ugly labels. They create an image of difference and distance. Instead, you could call this group "the students in Room 117," or "Mrs. Johnson's students," or "the intensive special education class." You have control over the language that you use to describe kids and teachers. Language is extraordinarily important in the image that is conveyed to ordinary student body members and to the public at large.

As a principal, you control the climate of your building. Several million dollars of educational research tells us this: You control the climate of your building. If you believe that schools are for all kids, or you believe that it is your responsibility to provide a quality education for kids in your community, that sets the tone for everyone else. You can wander into the classroom for students with severe disabilities, meet the teacher, get to know the names of the students. That kind of activity -- the message that these are full citizens of the building -- is not lost on other student body members.

As a building administrator, you can make sure that kids, even kids with very low tested IQs, have access to all the perks that ordinary student body members have: that they have class designations; that they get to sell candy and cookies for school fund raisers just like everybody else; that they have pictures in the yearbook; that they have lockers rather than cubbyholes in the classroom. As a building administrator, you can ensure the availability of those perks. They do not make kids smarter; they do not prepare people for work and life in the community, but they do affect, in a very profound way, the image of students in the eyes of other student body members.

As a building administrator, you can make sure that students with severe disabilities are visible and valued members of your school: that there are articles about these basic skills programs in the school newspaper, that there are slides of students with obvious disabilities in the promotional materials that you develop for orientation and for the school board.

As a building administrator, you can provide important support for an organized program of peer tutoring, or student advocacy, or special friends. You can make that program happen.

As a building administrator, you can ensure that students with severe disabilities have access to the full range of specialized environments in an elementary school, middle school, or high school. You can ensure that those kids eat lunch in the cafeteria, not in the classroom. You can ensure that they have access to the home economics room as appropriate. You can ensure that they have access to vocational education opportunities. You can ensure that your regular faculty members support the integration of students with severe disabilities in regular curriculum offerings as individually appropriate.

As a building administrator, you can make sure that there is no more "retarded graduation." Instead, students with severe disabilities should participate in graduation ceremonies and other all school events along side peers without obvious disabilities.

As a building administrator, there is a great deal that you can do to help realize those clear goals -- all without knowing anything about special education! (The suggested standards for building administrators is presented in Table 2.)

Table 2.

BUILDING ADMINISTRATORS

- LOCATION OF THE CLASSROOM
- LABEL OF CLASS AND TEACHER
- CLIMATE OF ACCEPTANCE WITH PRINCIPAL AS MODEL
- "PERKS" FOR ALL STUDENTS
- STUDENTS ARE VISIBLE AND VALUED
- SUPPORT FOR PEER TUTOR PROGRAM
- ACCESS TO SPECIALIZED INSTRUCTIONAL ENVIRONMENTS
- ELECTIVE CLASSES AVAILABLE TO SUDENTS WITH SEVEERE HANDICAPS
- PARTICIPATION IN GRADUATION AND OTHER ALL-SCHOOL ACTIVITIES

Classroom teachers. The real challenge to the classroom teacher is to take advantage of being on the regular school campus. There is a great deal that a teacher can do, and, indeed, needs to do, if students with severe disabilities are going to graduate with jobs, a place in their community, and somebody who cares about them who is not paid to, and does not have to. The kind of goals that classroom teachers can set are perhaps a little more familiar to us.

Teachers can set goals for themselves that all students in their class show progress on IEP goals. And, as regular teachers deliver report cards, so can special education teachers deliver something analogous to report cards, reporting on the status of individual student's goals.

A great deal of educational research tells us -- perhaps not surprisingly -- that students learn more when we spend more time teaching. One of the things that teachers can do is set goals for the operation of their classrooms. Set goals about minimizing down time. Set goals about using at least 80% of every instructional period for teaching -- not getting ready to teach, not cleaning up after teaching, but teaching. If a high school period is 50 minutes, we are talking about a teacher's commitment to spend at least 40 minutes of that 50 minute period teaching students what they need to know. There are very simple systems for monitoring how much time is spent teaching. Teachers or their supervisors could certainly set goals about how much time is spent engaged in learning.

Teachers can also set goals for individual students and for the classroom as a whole about how much time they want to spend in the community. You believe in community training, but how much time do you want to spend there? Is one day every other week enough? It might be for some of you. Is 30% of your instructional week learning important things out in the community enough? not enough? too much? I don't know. It is up to each of you. Time spent in community training is one of those things that makes a difference to kids. Set a goal. Take some data on yourself. Then reallocate resources in order to get yourselves closer and closer to your goal.

As a classroom teacher, you could set goals about opportunities for your students to interact with allegedly normal student body members. You might set a goal that says every student in this class will have an identified "special friend" or advocate. You might set a goal that says every student in this class on his or her daily schedule will have at least five periods in the day where he or she interacts with students without identifiable handicaps. Who knows whether five is enough or not enough. If you believe in integration -- if you have a clear goal that students get connected -- set some standards, take some data, and then change your behavior depending on whether or not you are meeting standards. You might, in the name developing friendships, set goals about how many nonhandicapped student body members you want involved as peer tutors or advocates. A clear numerical standard: I want at least 10 nonhandicapped tutors every term. I want at least 16. I want at least 25. Who knows what is enough? What is important is to set a standard, take data, and make responsive changes.

If you are a classroom teacher with a clear goal that kids will be employed when they leave school, one of the things that you can do is establish goals about the number of work training opportunities that you will develop in the community. You need to have more jobs than you have students because some job training opportunities won't work out, and because students need to be rotated, need to sample different work training opportunities over the course of their high school careers.

If you are a classroom teacher, you could set a goal for yourself about getting your own work done. Being a good classroom teacher in the high school in a community-based program for students with severe disabilities is, in fact, a very interesting job (that, of course, is a euphemism for a very complex job!). It requires many activities outside what we usually consider to be a teacher's job: developing and monitoring work training opportunities in the community, recruiting and monitoring curriculum integration opportunities within the high school, having regular contact with parents to follow-up on home based IEP goals. Those activities are critical to realizing the clear goals of schooling. They are tasks that need to be done. If something needs to be done, we can write it on the list and monitor whether or not we get it done.

Teachers could, if they believe in parent contact, set goals for how frequently they intend to have interaction with parents. Is a visit once a year enough? Some of you might think it is. Is a phone call every day too much? Some of you might think it is. If you believe in parent involvement, decide what it means to you. Set some standards, take some data, and, when you are not contacting parents as often as you want, change how you deploy resources so that you get done what you want to get done.

Teachers who are doing a good job of organizing resources for students with severe disabilities need to check off whether or not they have a classroom schedule. Is it developed, posted, and followed? It is possible to set that as a professional development goal for yourself and monitor how successful you are at following your schedule. Is that class schedule on the same bell schedule as the rest of the building? I hope so.

Teachers in classrooms for students with severe disabilities can also set goals that focus on the image of their classroom and can ask the question, "Does this look like a real classroom?" If an alien came off of a space ship and walked into the building, could it find the "severely handicapped classroom?" In most cases they could. Part of the job of a teacher who cares about the image of his or her students is to make the students look as normal as possible. To create that image of similarity, a lot can be done by manipulating the decor and design of a classroom.

A teacher who cares about building friendships and developing educated employers and educated neighbors, can set some goals for herself or himself or can work with a principal or supervisor to set goals about infusing the content of special education to other subject matter classes. Issues related to disabilities do not belong only to special education. It is possible to discuss genetic disorders in biology. It is possible to have a unit in honors English about how people with disabilities are portrayed in literature. It is possible to have units in home economics and family life that talk about behavior management skills or how a family that includes a child with a disability copes. I would suggest that in almost every subject matter, there is some way to introduce information or build skills related to interacting and supporting people with severe disabilities.

Another standard that a teacher might set is that other faculty will be satisfied with his or her efforts, a goal of staff satisfaction with the program for students with severe disabilities. What this probably means is that a teacher sets a goal to take data from regular faculty members at the beginning of the year, at mid-year, and at the end of the year. It is relatively simple to distribute a two or three item questionnaire that asks, "What has been the nicest thing about having us here?" "Where do we have potential for improvement (in other words, where have we screwed up)?", and "What do you want to know more about?" If you care about your image and the image of your students, gather that data. If the school environment is not supporting you enough or giving you all the opportunities that you want, ask them why. Request feedback so you can design change. (The suggested standards for classroom teachers are presented in Table 3).

Table 3.

CLASSROOM TEACHERS

- PROGRESS ON IEP GOALS
- TIME IN TEACHING
- TIME IN COMMUNITY
- SCHEDULED INTERACTIONS WITH REGULAR STUDENT BODY MEMBERS
- WORK TRAINING (MORE JOBS THAN STUDENTS)
- TUTORS
- PROGRAM DEVELOPMENT TASKS COMPLETED
- ACCESS TO REGULAR CLASSES
- CONTACT WITH PARENTS
- CLASS SCHEDULE
- DEVELOPED, POSTED, AND FOLLOWED
- REGULAR BELL SCHEDULE
- ORDINARY CLASS DECOR AND DESIGN
- CURRICULUM INFUSION
- STAFF SATISFACTION WITH PROGRAM

Parents. If you are the parent of a child with severe disabilities, there are of course many things that you can think about. You can ask, "Have I taken time to decide how I want to spend my son or daughter's educational time?" You can ask, "Are the goals that I want my son or daughter to learn actually included on the IEP?" If you are a parent, I think it is important that you go through the agony that teachers to through. Each year teachers confront the reality that there is lots that students need to learn. There are lots of work training opportunities that we could give them. There are lots of ways that we could create opportunities for interaction and friendship. There are lots of things that we could teach that would help students be competent community survivors and contribute to their household. Given that there is not much time but lots left to learn, what are we going to do? These are very, very hard decisions. It is important that parents go through the process and decide how to spend their son or daughter's educational time, knowing that there simply will not be time for everything.

Parents might include home goals on a son or daughter's IEP. These goals would be for certain activities that parents would carry over into the home, not necessarily "teach" at home, but provide opportunities for their sons and daughters to do what they know how to do in the home situation during after school hours or on weekends.

Parents who have a clear goal that their son or daughter be part of the social network should be prepared to provide support for a social life for their kid, the same kind of extra-curricular supports that they probably have provided nonhandicapped family members. This could include an allowance so the kids have a means to buy leisure time in integrated settings. Parents should be prepared to provide chauffeur service to and from school events and to the home of kids that might be their friends.

Parents need to advocate. Parents who have that clear goal that sons and daughters will live in the community with as much support as is necessary and that they will have nice interesting, integrated jobs need to commit to advocacy. They need to do things to help change post- school opportunities. (The suggested standards for parents are presented in Table 4).

Table 4.

PARENTS

- GOALS NOMINATED FOR IEP (DEAL WITH RESPONSE COST)
- HOME GOALS/PERFORMANCE OPPORTUNITIES FOR STUDENT
- SUPPORT FOR SOCIAL AND EXTRACURRICULAR EVENTS
- ADVOCACY ACTIVITY
  - TO CHANGE WORK AND RESIDENTIAL OPTIONS
  - TO CREATE ACCESSIBLE COMMUNITIES

Students themselves. What is all this going to do for the students with severe disabilities? What I hope it does is ensure that they have truly individualized education programs. Parents and teachers who make tough decisions about how to spend time are going to produce a program that is unique to the needs of each student. I would hope that kids have goals that are functional, that represent things that they need to know. I would hope that kids get training on those goals, that time is not spent on things that are not actually on the IEP. Students should get good instruction. They should be trained in small groups. They should have a personal schedule so they can learn to control their own fate.

Their IEP should include direct training on regular job sites over the course of their high school career. They should have different work training opportunities. They should have a resume that maybe gets updated every year at the IEP meeting. They should have a formal transition plan. When you get down to the level of what a student has, these are the things that make a difference.

To ensure that place in the community, students need to have some time spent developing leisure competence. Those of you that are parents know that your kids make you crazy when they can't use their free time appropriately: Take care of that. Give them an IEP that targets some leisure activities. They need to have instructional targets that will make them useful contributors to their household. They should have goals on their IEP that reflect, not what a curriculum developer in New York tells you is important, but what is important to the value and lifestyle of the family.

Students should enjoy regular training in the community. Students should look forward to knowing peer tutors, to having advocates, to making friends. They should look forward to participating in a wide variety of extra-curricular activities. (The suggested standards for students are presented in Table 5).

All of the standards we have mentioned -- for building administrators, district administrators, teachers, and parents -- are all things that we know how to do. The question is not whether every student with a severe disability should have the option to go to a regular school campus in his neighborhood. Rather the question is how each one of us -- in our own schools and in our own communities -- will get that to happen. The question is how we will move from where we are now to the point where kids have jobs, have a place in the community, and have friends. Getting where we need to be, getting where you want to go, will require an honest assessment of how many of these tasks on the list you have actually accomplished, and which are yet to be done. It will also require a concentrated effort and a reallocation of resources in order to get done what needs to be done.

Table 5.

STUDENT HIMSELF/HERSELF

- AN INDIVIDUALIZED EDUCATION PROGRAM
- FUNCTIONAL GOALS
- TRAINING ON IEP GOALS
- TRAINING IN SMALL GROUPS
- A PERSONAL SCHEDULE
- OPPORTUNITY FOR CONTROL AND CHOICE
- A JOB
  - DIRECT TRAINING ON REGULAR JOB SITE
  - SAMPLES JOB CLUSTERS/SUPPORT FORMATS
  - RESUME'
  - A FORMAL TRANSITION PLAN
- A PLACE IN THE COMMUNITY
  - LEISURE GOALS
  - PERSONAL MANAGEMENT GOALS
  - GOALS THAT REFLECT FAMILY VALUES & LIFESTYLES
  - TRAINING IN THE COMMUNITY
- FRIENDS
  - TUTORS
  - EXTRACURRICULAR ACTIVITY

The question is not whether you do it, but how you do it. And the real question is what are you going to do tomorrow?

A COLLABORATIVE MODEL FOR STATEWIDE IMPLEMENTATION

Summary by Richard Long

HENRY SCHROEDER (Moderator), Director, Indiana University
Institute for the Study of Developmental Disabilities

PAUL ASH, Director of Special Education, Indiana

BRIAN MCNULTY, Director of Special Education, Colorado

DIANE RENNE, Education Program Specialist, Arizona
Department of Education

JOLETA REYNOLDS, Assistant Commissioner of Special Programs,
Tennessee

The purpose of this session was to provide guidelines for development of state-level initiatives on LRE. State leaders from Arizona, Colorado, Indiana, and Tennessee, each of whom volunteered to take part in the National LRE Network, gave an overview of the current status of activity in their respective states.

Indiana. Paul Ash began by stating that 12 years of special education have failed to meet the promise of a complete life with social and living integration, gainful employment, and integrated leisure activities. The least restrictive environment (LRE) initiative began two years ago in Indiana, though it had a 10 year legislative history. In order to ensure a complete life for persons with substantial handicaps, the concept of LRE must be reflected in policies and procedures that are implemented in special education instruction.

The Indiana LRE initiative includes several components. One is the Indiana Least Restrictive Environment Project at the Institute for the Study of Developmental Disabilities, Indiana University, Bloomington. The staff of this project provides technical assistance, training, and materials to the local special education planning districts. Curricula and administrative modules, public awareness materials, and ongoing training opportunities are included.

Since August, 1986, a second component, funded by four state agencies, has supported 11 transition and supported employment projects for persons with substantial handicaps. A total of one million dollars has been allocated by the Indiana Department of Education, Indiana Governor's Planning Council for Developmental Disabilities, Indiana Rehabilitation Services, and the Indiana

Employment and Training Service. Goals of this collaborative effort include ongoing participation and commitment of moneys and services at the state and local level, continuation of state level joint funding projects, and support of legislation to ensure inter-agency participation. All projects involve inter-agency cooperation and a commitment to prepare persons with severe handicaps for integrated community-based employment. Other special education planning districts are participating in independent projects that address similar areas. Indiana is also striving to provide appropriate placement for even those persons with the most severe handicaps. These persons have been placed in private facilities in other states.

For LRE initiatives to succeed, it is important to remember several points. First, there is no magic formula for success. A successful program comes only through hard work and determination. Second, communication must take place at all levels: inter- and intra-agency, local and state, individuals and agencies/organizations. Third, cooperation must accompany communication to ensure effectiveness. Fourth, a commitment should be made to ideals based in realism. Fifth, a willingness to accept change driven by data, ideals, and results should be present.

Colorado. Brian McNulty pointed out that five years ago in Colorado, over 3000 children were educated in segregated institutional programs. That number is now 300. The children have been incorporated into public school buildings with an emphasis on quality services. The commitment to quality has been high at the local level.

McNulty feels that serving a child's needs may depend more on which district or state he or she resides in than on level of disability. One district may have integrated school settings while across the district boundary, self-contained schools or institutional programs are still in use. Funding is not the major issue, as funds for each child follow the child and reimbursement is provided for some teachers. The challenge to move more children with handicaps into integrated programs continues. National statistics show that movement toward LRE programs has not been substantial.

Many programs for people with handicaps foster dependence. A report by the President's Council on the Handicapped, "Towards Independence," states that out of 60 billion dollars spent on federal programs for people with handicaps, 57 billion goes to programs that promote dependence. More effort is needed toward programs that will increase independence, not limit it.

Emphasis should be placed on the balance between functional and vocational skill training and the need for social interaction. Social networks of friends are an important part of life for people with handicaps and their nonhandicapped peers alike. Visionary work in this and similar areas involves risk taking. Model sites provide a way for demonstration of how new techniques can and should be used.

A movement toward supported work and away from sheltered workshops has begun in Colorado. In the first year, 400 individuals were moved from sheltered workshops into supported work. While the national average for sheltered workshop hourly wage is $0.19, Colorado is able to offer $0.99. Average pay for the 400 individuals now in supported work is $3.45/hour. These workers now pay taxes instead of consuming tax dollars, a fact that legislators can easily relate to. A cost analysis of the state institution program revealed that $45,000. is needed annually to support each person in an institution. Group homes can be established for a cost of $3000. per person per month for the first two months, then $500. per person per month long term. The cost advantages are apparent. Informative data such as this should be made readily available so public policy may be appropriately influenced.

Political subdivisions met for one year and developed a statewide plan for transition to employment for all individuals. Inter-agency work has gone through three stages: cooperation, development of programs profitable to cooperating agencies, and finally an integrated public policy level. This integrated public policy level is exemplified in Colorado's public policy statements:

1. All Colorado citizens, including youth with handicaps, will have the opportunity for full participation in work and community life.

2. All human services systems in Colorado will assist individuals to achieve maximum independence and self-sufficiency.

Once outcome objectives were established, policy objectives were formed and include:

1. All young people with handicaps will be prepared for and offered real work settings for real wages with access to necessary support services.

2. All Youth with disabilities shall have access to functional life skills curriculum designed to prepare them to live and function in domestic, recreational, social, community, and vocational environments.

3. A transitional planning process will be developed for all students

and will be initiated for every youth with a disability at age 12 and over.

Rather than hide behind restrictive legislation, similar outcome criteria can be developed by other states that can be met within legislative guidelines.

The employment rate for post-graduate youth is unacceptable. A Colorado study found that 64% of post-graduate youth were still living with their parents. One-third were working full-time. The unemployment rate for the handicapped population in Colorado is 66%, while the rate for the nonhandicapped is 8%. The lack of public concern over the higher unemployment rate for individuals with handicaps is surprising. A Harris Poll survey of adults with disabilities found that 59% of those who are non-working considered themselves disabled or handicapped. Only 26% of the handicapped persons who work considered themselves disabled or handicapped.

OSERS has developed a federal initiative for systems change in supported employment, and offered five-year proposals. Colorado received one of the five-year awards. The goals of that project include:

1. Place 500 more individuals into supported work.
2. Provide training and technical assistance.
3. Develop clear definitions of responsibilities between agencies.
4. Develop model sites and training modules.
5. Develop a statewide network of trainers and consultants.
6. Increase consumer outcomes in terms of pay, independence, and satisfaction.
7. Develop linkages with the business community.

Through the efforts of the project, a skilled labor force -- and the necessary support -- is being offered to business.

The janitorial contract for the Colorado Department of Education is a supported employment project. Workers with handicaps are reported to do higher quality work than the nonhandicapped workers who previously held the contract. They earn over $6.00 per hour and are able to afford designer jeans and portable stereos just like their nonhandicapped counterparts. One year ago, these individuals might have been in a sheltered workshop earning $0.99 per hour. This is yet another example of how LRE concepts improve the lives of persons with handicaps.

State and local education and adult service providers need to work toward similar outcomes. Regular and special education need to increase interaction. Perhaps this interaction will develop in the field more so than at the university level. In Colorado, new teacher competencies have been developed in an effort to provide for this restructure. Pressure from parents and school districts can do much to facilitate change. In Colorado, monthly state leadership seminars with the division directors from state agencies meet for one-half day sessions to discuss gaps in the system and other issues. Inter-agency cooperation depends upon trust. This level of involvement meets with better success than involving cabinet level persons. The reorganization of the adult service delivery system in Colorado has been led by Developmental Disabilities. A directive approach is being used to allocate funds. This year, 25% of the total Developmental Disabilities budget is designated for supported employment. Next year, 50% will be so designated.

The major points are that database information can be expanded and utilized, public policy can be influenced, and community awareness and acceptance of the people with handicaps can be improved. Efforts to reach these goals are necessary if handicapped persons are to live, work, and enjoy leisure activities in the community.

Arizona. Diane Renne feels her department is not able to follow McNulty's advise and be a directive force. New school programs in Arizona must be promoted diplomatically. The Department of Education has no authority over the districts to force them to adopt a program.

The state's participation in the LRE network and the award of a statewide systems change grant has enabled the SEA to ask parents, schools, and agencies to identify problems and propose solutions for the delivery system serving persons with disabilities. Since traditional needs assessment surveys do not have good return rates, the SEA conducted a series of workshops in February and March of 1986, so that schools, agencies, and parents could voice their opinions. Issues from the workshops include integration, functional curriculum, and community-based instruction. As a result of the workshops, many schools became interested in being model sites for LRE. Since funding in Arizona follows the child and not the program, funding was not as crucial an issue.

Developmental Disabilities has led Arizona in the deinstitutionalization movement, beginning in 1975. Three state institutions remain, with a total population of only 500 persons, and just 30 children of school age. These children remain institutionalized due to 24 hour a day medical needs. Arizona has always had small (five persons) group homes, so there has not been a need to reduce their size.

Renne feels that a major obstacle for students with severe handicaps is the special education system. In Arizona, university courses that would promote special and regular education interaction do not usually have enough participation to justify offering the class. Some success is being seen with evening classes generally attended by those already in the field. There are seven model sites in Arizona, with plans for six more to be added next year. In one area, two principals are almost fighting for the opportunity to be a new LRE site. Has special education just assumed that resistance to integrated programs is widespread?

Private business has taken the initiative in employment for people with handicaps. Though Arizona obtained one of the first supported employment grants, many problems are yet to be solved. One of the LRE model sites had great success when they contacted the manager of a local shopping mall. The manager had no ties to developmental disabilities, but offered an open door and allowed staff to take as much time as necessary in training the students. He is now contacting other private businesses, particularly other shopping malls, promoting the hiring of individuals with severe handicaps. He acts as a reference for other local job sites and is promoting new sites on an international basis.

One of the best features of mall employment for the persons with severe handicaps is the social interaction. The students interact with a wide variety of people who are in turn reporting their satisfaction with employees who have handicaps to the management. Students with handicaps who are employed at the mall teach social skills to new students also with disabilities. The skills, including ordering in restaurants, are taught without any influence from the school. They are becoming part of the community and are helping their friends become integrated.

Some problems, of course, remain. There are still 2000 students in public and private segregated schools. One of the problems is that private segregated schools contend that the LRE initiative is trying to put them out of business. The goal of Arizona's systems change effort is that at least 25% of students who are in segregated schools will be back on the regular school campuses within the next two years.

Tennessee. JoLeta Reynolds explained that Tennessee had a state statute requiring the education of children with handicaps before P.L. 94-142, although the meaning of this statute was never fully realized. There are still segregated schools as well as classes the include age-inappropriate placements. Policies and procedures did not address LRE, nor was LRE was not a part of the monitoring system. To try to combat these problems, Tennessee contracted with an outside agency to rewrite state board rules to address LRE. The resulting new policies and procedures will be in place this fall. Monitoring procedures now include LRE concepts, and technical assistance is being provided across the state to clarify the new rules and requirements.

Sites for the LRE project were chosen judiciously in Tennessee. School systems chosen included those from rural and metropolitan environments, as well as those of varying size and degree of problems. One had been cited for an LRE violation when 18 and 19-year-old students were placed on an elementary school campus. This was voluntarily corrected and the administrator is now an advocate for LRE. A metropolitan area planned to build two new segregated facilities. That project is now on hold for one year and the school system has become an LRE model site. One of the districts will be used for a university training initiative. Regular education certification is being reviewed at this time.

In Tennessee, higher level government officials are being contacted about LRE, while most lower level officials are already in agreement with the concepts. A statewide advisory board for LRE has been formed and includes representatives from vocational rehabilitation, mental health, developmental disabilities, vocational education, special education, the state protection and advocacy agency, department of human services, and others. A statewide conference is being planned to promote the concepts of LRE. The advisory board is making plans to coordinate with key business leaders to gain support for the LRE initiative and establish job sites for integrated employment.

Leadership through policy development, monitoring and technical assistance is needed to promote LRE across the state. Administrators, teachers, and parents must work together in an effort to meet the challenge of LRE.

Henry Schroeder closed the session by re-stating the focus of the LRE state initiatives: policy/rule development, establishment of model classrooms at the secondary level, inservice training, transition planning, inter-agency agreements, and collaboration between state agencies and private industry.

PARENTS' ROLE IN QUALITY SCHOOL PROGRAMS

Summary by Vicki Pappas

CAROL INMAN (Moderator), Montgomery County, MD

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JUDY MARTZ, Colorado Springs, CO

The purpose of this panel presentation was to exchange ideas about what parents have done and can do at the local level as they advocate for their child to be educated in the least restrictive environment. Central to the discussion was the sense that parents are change agents.

Four parents shared their experiences: Barbara Buswell, parent of Wilson, a kindergartner with "a body that doesn't work" and crude communication skills, who sees himself as a "regular kid"; Judy Martz, parent of Todd, a teen-ager with Down Syndrome who wants all the "perks" that go with being in a regular junior high school; Teryl Hill, parent of Tracy, a ten-year-old with multiple handicaps, who has been in a regular classroom since she's been 18 months old; and Gladys DeVane, parent of Glenn, a young adult with mental retardation, who is finishing high school and living in a group home. Carol Inman, former Deputy Assistant Secretary of OSERS and parent of Mary Elizabeth, a high schooler with severe mental retardation who has always been "kept around normal kids," served as moderator of the panel.

From the beginning, Barbara Buswell and her family committed to raise Wilson as they had raised their older son. They decided to "go for the gusto" and to give him the same experiences, taking him to restaurants, church, piano recitals, flying on airplanes, whatever, even though he needs to be in his wheelchair and assisted in accomplishing most activities. While he started preschool in a specialized program for children with physical handicaps, he is now in a regular first grade classroom, in a building where other children with physical handicaps are still in special classes at the other end of the hall. An aide assists him with paperwork and his schoolwork. Getting Wilson to an integrated first grade placement was "real different" for the Buswell family, challenging and not an easy change, because children like Wilson had never been integrated before. Buswell shared what she had to do to get there and what they learned in the process of engaging in a very worthwhile endeavor.

Even though Mr. and Mrs. Buswell always thought in their hearts that it was right for Wilson to be with other children his age who did not have handicaps, they had to gain the courage to speak up. They knew that Wilson learned much from watching interesting things and listening to interesting people, and they knew that if he remained only with others like him, strapped into a wheelchair or lying on the floor, he would not have enough opportunities to learn and develop. His brother and sister played an important part in keeping the challenge in the forefront of the Buswell's thinking by asking questions that were difficult to answer, like "I'm proud of Wilson. He's smart. He's fine. Why can't he go to my school?" As parents, the Buswells had to clarify their vision of what they really thought was right. As they looked down the road, they felt Wilson needed practice in interacting with people who don't have disabilities because that was his perception of himself and that's what he liked.

What gave the Buswells confidence to go forth? First of all, formal assessments assured them of his cognitive competence. More importantly, neighbors gave them endorsements such as "Wilson does so well playing with our kids. We think he ought to be with regular kids." Likewise, the parents received support from peers, friends, and family, and were able to think through their decisions with them. They also kept talking about Wilson's needs, what they wanted as parents, and what was best for him -- the "repeat-repeat-repeat technique." Presenting and clarifying their position seemed to be an on-going activity. They also sought and found new models and mentors, both nationally and in Colorado, especially of parents who had taken the risk to push for their children.

Based on her personal situation, Buswell joined Judy Martz to develop workshops for the Parent Training Center, where it was possible for parents to explore different aspects of the concept of LRE. The workshops were co-sponsored with their state Department of Education, which provided resources and a supportive partnership. The day-long session provided information on the law, discussions of issues, identification of strategies to use (such as peer tutors, awareness activities for children without handicaps), panels of parents and regular and special education teachers to share experiences, and information about state-of-the-art practices. Their goal was to provide parents with a clear vision of how their kids could be integrated and to show parents children who were challenging to integrate so that they could develop a vision of what was possible for their own. Buswell encouraged parents to approach the Parent Training Centers in their own states to try similar sessions for parents.

Judy Martz focused on how parents can and ought to use the IEP process to advocate for their children. Her son, Todd, now in a self- contained classroom in a regular junior high school, is receiving a community-referenced education because of her work as a strong partner on his IEP team. Since his placement, she has found, somewhat to her surprise, how important it is to Todd that he be a junior high student and that he have all the "perks" that go with being one. Having a school sweatshirt, wearing the school colors, locking his own locker, and carrying a gym bag to school like his other kids are all extremely important to Todd.

Martz strongly urged parents to use the IEP as a tool to advocate for more integration in their children's programs. Once parents know the IEP process well, they can be more effective as a planning partner rather than remaining at the mercy of the team. Parents need equal information and training regarding how the IEP process works. The Parent Training Center spends much time with parents regarding how they can impact the quality of their child's school program: They talk about assessments and what is "good data," and about kinds of needs and how to build them into goals.

Martz related how long it is taking her and the team to develop a strong IEP for Todd this year. In one two hour session, they completed the description of his current level of functioning and developed general goals. At a second session they will review what his day will look like, in order to meet those goals. The experience has shown her that in order for the IEP process to be most useful, parents need to be very clear in what they want for their children once they leave school. Because she and her husband did not want Todd merely prepared for a sheltered work placement after graduation, they presented long-term goals to the IEP team in the areas of employment, friends, and Todd's place in their community. They expected the educational program to build toward these goals. This was not news to the team, because for several years, the Martz had been talking with them about transition to something other than a sheltered workshop after high school. While educators may think "you're unreal and naive -- and you may be", nothing at all will happen if you do not even try! Because the Martz were able to articulate what they wanted in the future for Todd ("five, ten, and fifteen years out") so clearly, it has been easier for them to use the IEP process to get that.

Once the IEP is written, Martz found that she could not relax. Parents need to then begin to monitor the implementation of that plan. Many very fine IEPs can end up in drawers and very bad programs result if parents fail to monitor very aggressively what has been written down.

Martz also urged parents to constantly seek the newest information, come to conferences like this one, take good notes and read them over, and talk with other parents. She felt it was hard being a "pioneer" or a change agent without allies. She also cautioned parents that when they returned home, it would not be any easier because they have more information -- it will actually be harder. The disparity between "best practices" and what is being offered will be very frustrating. If integration is not typical of a school system, Martz warned, it will be difficult to be a pioneer and to try to deal with your own level of frustration. The outcome for your child will make the struggle worthwhile.

Next, Teryl Hill also spoke of how she used the IEP to reflect what was needed in her daughter Tracy's life to make her valuable in integrated settings. Tracy, now 10-years-old and using a wheelchair, has been in an integrated setting ever since she was 18-months-old despite very severe and multiple disabilities including cerebral palsy, profound retardation, and blindness. She now attends a regular fifth grade in the same school as her younger sister, riding the school bus together, often eating lunch, and going to recess at the same time. Important assets to her integrated program are her father, a carpenter who has "built ramps around town," and the fact that in her home -- Eugene, Oregon -- all mass transit has wheelchair lifts.

A key feature of Tracy's IEP is that it has things on it that are not academically-based. While some might have a problem with the type of items that are in Tracy's IEP, it was important to the Hills that Tracy's hair is combed, and that she is capable of doing that, and that if she has drool, that it be wiped off. These are on Tracy's IEP because normal peers don't have drool on their face and they look nice. Her IEP also states that she will be integrated as much as possible with her age appropriate peers. She is in her classroom for a total of three hours a day -- for her therapy and for some of her programs. Other parts of her program might be run by a peer tutor in a regular classroom. She also does the same social things that her peer tutor does, such as attending soccer games that her peer tutor plays in.

Such an atmosphere in Hill's school system was accomplished by much effort of many parents. Hill was the co-founder of a parent organization called Bright Horizons. They spoke on many parent panels to many doctors about what they would like to see with regards to optimal medical treatment, to those who create zoning laws, to educators, and to legislators. They are also regular speakers for university special education classes and high school family life classes.

Hill has great faith in the IEP process, but knows also that unless parents become strong partners with the school district, the plan may not be implemented as intended. Parents need to know where the money is and who the players are so that when barriers crop up, a parent will know who's funding what, how that money is funneled, and what the regulations are for spending that money in order to suggest feasible solutions. She was also able to recruit nursing practicum students to help Tracy with feeding so that she could remain in the regular lunchroom.

As a member of her school's Management Council, Hill described the data they collect annually regarding how parents and students felt about the children with handicaps in the school program. This year, 92% responded they felt positive to excellent about how happy the children with handicaps are in that school. They are not at all approached about not liking these children in school. Quite the opposite occurs: The peer tutor program is a positive force in the lives of students without handicaps. Peer tutors write monthly essay reports evaluating their work and Tracy's progress.

Gladys Devane believes that parents often forget that their children with disabilities will grow up to become adults. Parents are so busy with day-to-day responsibilities that they do not look further down the road to see what will happen to their children when the public schools are no longer responsible for services. She asked parents to leave the session with only one thing to remember: "My child is going to grow up, and I need to start thinking about it today."

Devane confessed her own short-sightedness. She had been quite comfortable with Glenn in a segregated school and would have picketed to keep him there! She had "adjusted her values" to keep Glenn where he was and "did crazy things" to justify keeping him segregated. When he went into an integrated program in the public schools two years ago, it was "the best thing that ever happened to him."

Then it was time for Glenn to graduate, and Devane had to think what Glenn could do. She had always answered that question by planning on the sheltered workshop, but then she heard Lou Brown!

Now, Glenn lives in a group home and is working, while attending his final year in high school. Through these transition years, Devane has learned that she had to think about her son's total life. Not only where he would live, but also what she thought was right for him in recreation, employment, and his general quality of life. She continues to stress what she thinks is right for her child. If parents do not think their children deserve the best, then they are not going to get the best. Parents are responsible for making sure that their children get the absolute best that their community has to offer. They should not ask for what may be convenient for parents, for the school, or for the agency. They should ask what is best for their child -- then go after it. Parents need to be willing to go out on a limb for it, or their children won't get it.

Advocating what is best takes a lot of hard work and does not always endear a parent to the educational system. Parents naively believe that if they are right, then "right will prevail." Right will prevail after a lot of hard work, some threat, and a lot of convincing. Devane was involved in setting up a residential program for Glenn when it became obvious to her that current residential services were not adequate and that working within an agency was not going to give Glenn what was "best." She set out to change the system with a group of parents, and learned that not everyone would agree with them. They began to develop an alternative residential program, and based their efforts on three questions: 1) What do I want to do in the community? 2) What do I need to know to do it? and 3) Who can give me the information to do it? They wanted comprehensive residential services in the community and wanted to give choices to people like Glenn. Even after learning all that they would encounter -- more bad than good -- they persevered, incorporated, and now run two group homes in Glenn's home community. At the same time, the schools just "happened" to begin to work on transition programs.

Devane cautioned parents not to leave it to luck to get things together for the post-school years. Rather, parents need to say to their schools and their communities that this is what they want. Often, it helps to get three or four parents together. Parents also need to weigh the pros and cons, the assets and the liabilities (and the list of liabilities will always be longer!). Then they must say to themselves that they are willing to risk, willing to make people unhappy, because they truly believe they are asking for the right things for their child, the things that they deserve. And only through you, as parents, can they get that.

Carol Inman concluded the panel presentation by adding that the climate for advocating quality integrated programs is right. State and local directors of special education are talking about integration: It is "the subject if the year." Parents need to talk with them, make it known that parents are very interested in it, and that they are willing to help because administrators cannot do it alone. Some of the most effective change has occurred when parents have joined with professionals, at both the state and the local levels, on task forces, ad hoc committees, commissions, and advisory committees.

Following the panel presentations, the audience engaged in a discussion that centered around effective strategies for using the IEP as a tool to get integrated placements for their children. The following points were made about monitoring IEP implementation:

- Several parents suggested an on-going, daily communication system with the teacher that can be written into the IEP. A checklist or a daily/weekly note can indicate what activities the child engaged in and when.

- One parent described a log/notebook that was exchanged between teachers and parents. Teachers commented about what her child had done during each period, good or bad, each day. She often wrote questions back. This was written into the IEP to assure it was done. It has proved useful in showing progress and in subsequent IEP meetings.

- Another parent wrote frequent meetings into the IEP. She touches base informally with key teachers every six weeks to see how the IEP was going. This is reasonable to suggest, especially when something new is being tried.

Some questioned the limits of LRE. A parent of two children with mild and severe handicaps reminded the audience that LRE is for everybody, not just for those with severe handicaps -- everything that is accomplished with those with mild retardation and less severe handicaps benefits all children. But we need each others' support.

A parent of a child who is deaf was concerned about "mainstreaming," and noted the advantages of specialized schools and the need to have such an option available for the deaf community. Another parent of a deaf child described her child's successful integration, and argued her right to have integrated models available.

Another part of the discussion highlighted issues regarding making friends and becoming integrated into extra-curricular activities:

- While there isn't enough access yet, one parent stressed the need to continue to push hard. Different start and dismissal times (because of bus schedules) make access to the rest of the curriculum difficult.

- Peer tutors can be useful in extra-curricular areas. A tutor or an aide could assist a child in the locker room so that he could have access to the swimming classes.

- Opportunities in the community can also be tapped. Children can sign up for the regular scout troop in their own school, classes at the "Y", or the community center. Don't tell the organizers that your child is handicapped - just sign up!

- When Big Brothers/Sisters was not available to her child because he had a father, one parent utilized the Volunteer Students Bureau at the university. Sometimes she even paid other students to take her son to a movie.

Finally, overall suggestions were made about the use of the IEP process:

- Use the assessment information to talk about where the child is, and then where the parent wants the child to be. Once everyone agrees, begin to discuss where that will be implemented.

- Parents should make goals so airtight that the only place goals can be achieved is in an integrated setting; for instance, a goal might be written stating the child "will have the opportunity to interact with non-handicapped kids three times a week."

- If the team refuses to put parents' desired goals in, then they refuse to sign the IEP. Be prepared to start due process. Also enlist an advocate to help.

- Build a very thoughtful case and make it airtight.

- A principal reminded parents that the IEP is only as good as they deem it's good. Don't sign the IEP unless you feel you have consented in an informed way. The IEP is everything in the document, not just the front page.

- Parent Training Centers offer a core course in rights and responsibilities that can be very helpful to parents.

DEVELOPING DISTRICT LEVEL SUPPORT FOR LRE

Summary by Stine Levy

HARMON BALDWIN (Moderator), Superintendent, Monroe County
Community School Corporation, Bloomington, IN

SHARON FREAGON, School Board Member, DeKalb, IL

TIM MCNULTY, Director of Special Education, Santa Monica, CA

This session focused on how two districts overcame obstacles during the integration of students with severe disabilities. Sharon Freagon described the needs of school board members in this process while Tim McNulty spoke from the perspective of a director of special education.

In DeKalb, the integration of students with severe disabilities was begun ten years ago when the school district found itself in financial trouble. As is true for many school corporations, the district was providing education for students with severe disabilities in a new, segregated facility, located in the middle of a corn field. When financial circumstances found school board members divided in their deliberations on which schools to close, Dr. Freagon was drafted by parents of students in special education to represent their interests on the local school board.

Although the school board is ultimately responsible for making policy, members of the board rely on the superintendent for information on which they base their policy decisions. This means that school board members, who are not trained educators but come from all walks of life, need to learn how to ask the right questions in order to evaluate and act on the information provided them. Regular inservice training is essential to heighten school board members' awareness of LRE and related special education issues. They need to learn to ask the director of special education and the district's legal counsel for their opinions, to consult with other school districts which have experienced successful integration of special education students, and to find out what the literature says about LRE.

In DeKalb, little is known about the outcome of special education, since special students are not included in the regularly scheduled follow-up studies which are conducted after the completion of general education. Other inequities exist. While regular students have assistance with their transition into adult life in the form of counseling and assistance in getting into college, equivalent assistance is not provided to students in special education. Freagon pointed out the necessity for providing assistance to all students to ensure that they can become productive members of society. This includes special education students as well as those who drop out of school (25% of the freshman class) and ultimately become a drain on the nation's economy.

Dr. McNulty next described the history of integration in the Santa Monica area. Even though California has a very complex regional service delivery system, the history of integration in McNulty's district parallels that described by Freagon in DeKalb. In 1978, all students with severe disabilities were receiving education in isolated facilities.

Integration was initially conceived for budgetary reasons when the district experienced declining enrollments. Thus, integration initially did not flow from educational policy but from fiscal considerations. This resulted in the "dump and hope" method of education in which elementary schools became integrated with little regard for what was happening within the classrooms. High school special education continued to be provided in isolated facilities with the concomitant warehousing of students, lack of peer interaction, and low teacher morale. When the superintendent was approached with an alternative policy of moving all high school students to regular campuses, parents of the disabled children proved to be the major stumbling block. Parents of elementary students, who had already experienced success with integration, were called on to meet with concerned parents of older students. This proved to be very effective, since parents of integrated younger students with disabilities did not want to have their children graduate into isolated facilities when they reached high school age.

After integration of the high school students with severe disabilities was approved, the administration had to deal with issues such as availability of classroom space other than in basements; access to facilities; which students to integrate first, the most severely or least severely disabled; the impact of integration on teacher rights and contracts; liability issues resulting from children being taught in the community, especially when aides are often solely responsible for students away from the school campus; availability of related services; educating parents about their legal rights; and the acceptance of students with disabilities by their nonhandicapped peers. While school policy was being discussed and formulated, parents of elementary and high school students continued their meetings and the director of special education addressed community groups and local government units to gain acceptance of the new policy.

When the move finally took place, regular school students linked up quite naturally with special education students. There was also very little opposition from teachers. However, some unexpected problems did surface. Some parents protested when their children with severe disabilities were sent home from school during final exam week, when there were no regularly scheduled classes. Teachers were unexpectantly threatened with arrest for child abuse while they were faithfully implementing behavior management plans in community settings.

McNulty emphasized the need for district-wide policies regarding LRE, a solid partnership between parents and schools, and a commitment to students from special education as they move into adult life. He agreed with Freagon that this same commitment needs to apply to children who drop out of school.

Dr. Baldwin entertained questions from the floor. Most of the ensuing discussion centered on the question of policy statements regarding implementation of LRE. To what extent are teachers who are using community settings as educational sites liable in the absence of written policy? Freagon responded that the best way to prevent establishment of restrictive policies for special students is to apply existing school policies, designed for regular education, to special education as well. She argued that special students are part of the school population and should not require their own special policies. For instance, regular school children have taken field trips into the community on a regular basis for years, so no new policies are required for teaching special students in community settings. McNulty stated that if there is a question of legal liability, the director of special education should be advised. Baldwin summed up the discussion by noting that teachers and parents alike need to address questions and concerns to the entire administrative chain of command, from principal to director of special education, to the superintendent of schools and finally to the school board, in resolving difficult and persistent problems.

THE EDUCATION OF AN ADMINISTRATOR*

HARMON BALDWIN

Superintendent of Schools, Bloomington, IN

More than a quarter century has passed since I first became a school superintendent. During these years, I have had a number of educational experiences, some of which have changed my perspective.

I shall always remember the school board member in North Manchester, Indiana, the father of a son with Down syndrome. This board member also served as a board member for the Wabash County School of Hope. That board was composed of parents of children who had similar "problems." The Public Schools of Wabash County were not accessible to these special needs children; so, as a result of personal contributions, bake sales, and who knows what other means, that parent group raised money to rent an abandoned filling station on the north side of Wabash, cleaned it up, and operated their School of Hope. This was not a real "School of Hope," but, rather, a holding place during a part of the waking hours prior to students' later acceptance as residents at the Fort Wayne State School or some other institution.

Then in my career, the needs of special children were just emerging and, at that time, in Indiana the only "accepted" exceptionality was speech and hearing. I recommended that a speech and hearing program be instituted for the Manchester Community Schools, and the only initial support vote that I had was from the board member with the child with Down syndrome. Board members then raised the questions -- like board members and administrators do today -- "How can we afford it? Do we have other needs which are greater? What can we expect if we invest this money?" After the usual study of support material, my recommendation was approved and a speech therapist employed -- an initial step.

My next milestone in the evolution of special education came in 1967, when the Indiana General Assembly was considering mandatory special education legislation. Two women, Amy Cook Lurvey and Muriel Lee, seemed to be leading the charge. Most of us who were involved in that legislation were neophytes about children with special needs and potential programs to fulfill student needs. Because there was not enough information and time, the General Assembly failed to act, but a parallel concept was approved in 1969 with a four year lead time to prepare to meet the special needs of special students. A full blown program was off the ground.

In this quarter century, Indiana school communities and Indiana school administrators have slowly -- yes, very slowly -- accepted children with special needs in their schools and have attempted to provide educational experiences tailored to meet those needs. However, some continue to struggle with the use of dollars, the problems of mainstreaming, space for classes for students with handicaps, and the host of other things which help to make each day challenging.

In the last two years, I have become acquainted with another emerging special educational concept: Students with special needs do not need to be sheltered from regular students, nor do people who are segregated really learn to live successful lives. In 1983, the Director of Special Education for the Monroe County Community School Corporation, Jerry Keener, began to move classes for students who were moderately mentally handicapped from the segregated public center into the public schools. That move was completed during the 1984-85 year, my first in the district. Because of some anticipated reactions from those who were not familiar with the needs of these special people, it was necessary for Mr. Keener to help me understand this different approach. Almost one year ago, he came to me and the other superintendents in our cooperative with the concept that we ought to move the students who were severely and profoundly handicapped from the safe haven of the separate facility into our public schools. Thus, my thoughts are based upon my observations in the last year. You see, Monroe County does not speak out of fear of what might happen; Monroe County can speak out of what has happened.

Parents of our children who are severely and profoundly handicapped were gravely concerned about their children being moved from the familiar and safe environment in which they had spent most of their waking lives. They believed that their children would be ridiculed in the new environment. They knew that the safety precautions present in the sheltered environment could not be available in the new -- normal -- environment. They knew that the expectations of the teachers in the new environment would be too demanding. All kinds of fears, real in their minds, existed, but we persisted and moved the classes. During this year, we have had the good fortune of being a participant in the project dealing with providing an atmosphere for learning with the least restrictive environment. Let me tell you what I have observed.

First, during the recent meeting of the American Association of School Administrators in San Francisco, California, I spent a day in the San Francisco Public Schools observing their integrated programs. I was hosted by Dr. Wayne Sailor from San Francisco State University and by Ms. Marilyn Farwell from the San Francisco Public Schools. I saw children labeled as severe and profoundly retarded on an elementary school playground. They were playing dodge ball, *even though more than two-thirds of them were in wheelchairs.* Who had accepted these students and was playing dodge ball with them? Yes, nonhandicapped children in the same school who felt a kinship to these "peers".

I visited a business in the community where two people, one 15 and one 17, were involved in a work experience. They had left their high school and traveled to their training station. It was the supply room of a "party house". Their responsibilities on the day that I visited were to wash chairs. Each of the students was working with a job trainer. The 17-year-old girl had been known to Dr. Sailor for approximately four years. When he first knew her, her body was in a fixed fetal position with little mobility. The day that I saw her, she stood erect with some mobility. Her limited vision required extra supervision as she worked, but she responded readily to the instruction of the job trainer.

I visited a third site where young adults were working in a neighborhood restaurant. One of the people had the task of table set-ups, including the folding of napkins into a decorative and intricate form. When a table was vacated, this person bussed the table and re-set it. The second person was involved as a salad chef. Both were able to use the complex Bay Area Rapid Transit system to move independently from their homes to their place of work. All these people were making remarkable progress with the least restrictive environment concept. It showed me what is possible for some for whom society once had little hope.

But that was in San Francisco. What have I observed in Bloomington, Indiana? The superintendents of our special education cooperative spent a day, recently, observing our students at their job sites. Presently, 20 people, 17 of whom are moderately mentally handicapped, 3 of whom are severely and profoundly handicapped, are in job experiences in the school community. Those whom we saw that day were involved in work which ranged from housekeeping in an office to running a dishwasher in a Mexican restaurant. With their limitations acknowledged, each was doing something in excess of accepted expectations five years ago.

What about 1985-86 experiences in Monroe County? Were the worst fears of the parents realized in our school community? Definitely not. I have seen the students in each of the school sites -- Rogers Elementary, Binford Intermediate, and Bloomington High School North. Not one case of harassment has been reported. Rather, students are volunteering to assist these special people with their special needs. More of it is done at Bloomington High School North than the other two schools, probably due to the age grouping. The principals of the schools report good acceptance by the student body. They accept them as people, people with special needs.

I do not want to mislead you to suggest that the educational *millennium* has been reached in Monroe County. I do not want to suggest that our year has been absent of challenge. I do not want to suggest that all of our parents are glowingly happy. But I do want to affirm that our program is stronger than it was a year ago, that our students with moderate, severe, and profound disabilities are reaching personal expectation levels which few of us had for them prior to this experience. Twenty of our students are involved in job training which give promise, with help and assistance, of them later becoming employable within our school community, thus, providing for themselves more self-sufficiently.

We are in a new educational age. The philosophy of this age is that all people can learn. For some, it takes a little longer. Some will not learn quite as much, but people have a way of meeting both the expectations of their family and teachers, as well as themselves. This expectation can be best attained, not in the sheltered environment which has been a part of our past, but in the least restrictive environment which must become a part of our collective future.

I was intrigued by the notice in a position paper recently distributed by the Division of Special Education of the Indiana Department of Education and the Developmental Training Center at Indiana University. It carefully highlighted the fact that the position paper was not state policy and should not be construed to be so. However, I want to be recorded as one who favors it becoming state policy at the earliest possible date. I recognize that not all school communities are as favored as Monroe County, where our time was ripe and circumstances were available to make the least restrictive environment work in 1985- 86. However, I do think that incentives should be in place to allow all of us to make the effort.

Least restrictive environment is an idea whose time has come. We must not put more "straw men" in the way of its implementation. I hope not, because that will keep some special people from meeting their potential. All have that right. Our obligation is to pave the way.

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* A transcript of Dr. Baldwin's dinner address at the conference was unavailable; therefore, with his permission, we have included his testimony at public hearings in response to the Indiana LRE Paper, held May 21, 1986, in Vincennes, Indiana.

FROM A PARENT'S POINT OF VIEW

CORY MOORE

Parent Information and Education Coordinator Association for Retarded Citizens/Montgomery County, MD

I doubt that I can share with you the excitement I feel at being here with others who believe as I do and who are involved in making a world that works for all its children.

I am, as one colleague expresses it, a "born-again mainstreamer". I acknowledge that. She also cautions that what one person sees as consciousness-raising, another views as brainwashing. So be it. I've arrived at my total commitment to the full meaning of LRE through personal experiences -- very personal experiences -- as a teacher, a parent, and an involved observer. Let me share some beginnings and then I'll tell you about today.

I learned initially and directly about mainstreaming from two different perspectives, both of them abrupt, without warning, and overwhelming. The first was as a young teacher in a very small California school district when Larry came into my second grade classroom one chilly October day. My principal escorted him to the door, mumbled something that sounded like "cerebral palsy" and ...instead of--disappeared...forever. I learned a lot about myself and attitudes and adaptations and children during the course of the next few months.

As a teacher, I experienced all the worries that I continue to hear today. What would Larry learn in a classroom which wasn't designed for a child with both physical and mental handicaps? How would he affect the classroom dynamics? Would he need more energy and attention? Would he distract others? Would he be teased? Ignored? What would my role be? My classroom was not just a work place; it was a community. Social learning took place there, too. I learned to confront my own dark side and, as Andre Lorde wrote, "reach down into that deep place of knowledge inside...to touch that terror and loathing of any difference that lives there."*

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* Andre Lorde in "This Bridge Called My Back: Writings by Radical Women of Color."

82

The children in my class learned, perhaps more easily than I. We all learned that "different" was neither "good" nor "bad", just "different." Larry learned confidence in his ability to function outside the narrow world of his home and whatever special school or class from which he had come.

That experience with LRE, important as it was, did not prepare me for the birth and early years of my second child. That child, a daughter, was mainstreamed into our family 22 years ago. She carries a number of labels: mentally retarded, orthopedically disabled, multiply handicapped, speech impaired. In our house, we call her Leslie.

Our family, Leslie's family, has learned a great deal about the world we live in and its values. We know -- we really know -- that our society is rooted in competition, thriving on the winner-loser tradition, looking always for the easy solution, the "quick fix". We know how that society feels about those they decide cannot be winners. We've known prejudice.

I share with you a story I've not told many times before; I suspect it was one that stayed buried until I was able to articulate it without reliving it. It happened long ago at our community swimming pool. Leslie was then 11 years old, nonambulatory and multiply handicapped, and, at the time of which I speak, she was still recovering from a stroke-like migraine attack that had hospitalized her for four weeks and left her without speech and partially paralyzed. This beloved child was crawling, slowly, with enormous difficulty across the wading pool to make friends with a toddler who was dipping his toes on the other side. It was our first outing since the onset of the migraine. It was the first time Leslie had crawled in almost two months. I was holding my breath when suddenly the click of heels sounded from the other direction. I can still see the streak of anger that was the toddler's mother. She swept her small son into her arms. I have never forgotten the furious look she aimed at her husband, the person who had allowed this "menace" to confront their baby. The menace was my daughter.

That experience left me shaken to the very core of my being. We parents learn to cope and we learn to protect our children -- our "different" children -- from the cruelties of others. We never stop feeling the pain when our child is rejected, taunted, shunned. And that sometimes gets in the way of parents developing a vision of what the world should be like for all its children.

And yet, even with those brutal experiences, perhaps in part because of them, some of us have developed a vision. We parents, some of us, have kept our children visible, have placed them in your schools. We have learned that there is another way, a way in which everyone can win, where everyone can profit from learning about individual differences and in the process discover all those really meaningful, important things that we human beings all share in common.

Your SEAs and LEAs know parents like me. We grow in all parts of the country, we pushy ones who are never content, no matter how modern the separate schools you build and how up-to-date the equipment. We cannot be squelched. Therapy tanks no longer satisfy us. We shake our heads. We reject what you offer. We won't sign the IEP. We muster the courage to insist that our children belong. We want our children in neighborhood schools with their sisters and brothers. We want them to be part of the real world with all their peers. We're pressing, always pressing, for the true least restrictive environment.

We are risk-takers, some of us, and our courage and strength have made systems change and bureaucracies move. And I do understand how difficult that is. I'd like to share with you my analogy for bureaucracy change. This is for parents, particularly.

I see a bureaucracy as a sleeping elephant. You try pushing him from behind and he doesn't move. You pull on his trunk and he stays asleep. Now, if you can be a buzzing mosquito, relentless in your direct attack, you may just get that elephant to move. Unfortunately, you can't ever be certain that the elephant of bureaucracy will move in exactly the direction you want it to go -- and you run the risk of getting swatted along the way. Being a pioneer is never easy, but always stimulating.

Separate educational facilities are inherently unequal, Chief Justice Earl Warren once admonished us. The programs of yesterday were designed by protectionists and segregationists for the best of reasons and the worst of reasons. Happily, in the history of social and educational development, new learnings take place for all of us and that means systems and bureaucracies, as well as individuals.

And that leads me to my third, and current, LRE experience. Back where I come from, we have a program for students with severe and profound handicaps that is educating 60 students between the ages of 5 and 21 in 10 classrooms in nine typical, age-appropriate schools. It was designed by the University of Maryland and the Montgomery County (Maryland) Public School system and funded initially by the United States Department of Education. I helped (substitute "pushed," "advocated," "played a buzzing mosquito") in getting that program started. For three years, under the original federal grant, I was the parent facilitator with the program which is now completing its fourth year and is an integral part of our schools.

Our 60 students, housed in typical schools, interact with typical students; we call them "special friends." Our students are educated in the community environments they need to know about. They are trained in community vocational settings. And it works -- for them, for their families, for typical students, for educators, for administrators, and for the community.

Now I do understand what some of you may still be thinking. I was at a conference in New York recently where three young, energetic, enthusiastic special education teachers shared the domestic skills teaching program they had set up. They were taking their students into a group home in the community three times a week. They were pleased with what they were doing and had presented a workshop at a national conference to share it with others. I sat with them one evening and I asked what other community-based programming they were involved in. They were a bit surprised by my question. "What do you mean?" said one. "What else could our kids possibly be doing? They're severely retarded." I was reasonably gentle as I described the learnings that go on for the students I know best: the fast food restaurants; the recreational and leisure experiences at libraries, bowling alleys, swimming pools; the vocational settings in the community. One of the teachers looked at me skeptically. "What are their I.Q.s?" she asked. I thought a minute. "I guess they're all under 30," I said. "Oh," she smiled in relief. "That explains it! Ours are all under 25!" As parent facilitator with the project back home, I listened to a lot of parents. I continue in a back of the scenes role to listen to parents today. I'd like to share with you the parent point of view toward this program. Our parents joined this new direction ranging from committed and enthusiastic to hesitant and fearful. All of them had a bit of healthy skepticism concerning the possibility of new learnings for their children; lots of good people had already worked with those children back in the segregated settings. Some had worries about the reactions of others, lack of understanding in the wider community. And a few had grave misgivings about the change from the warm protective environment of the sheltered schools their children had attended, where they themselves were active and involved. Trust in new directions takes time. The program has more than proved itself.

What has been demonstrated, repeatedly, is that our children learn through real happenings in the real world, not by the artificial simulations that segregated schools offer. The adolescent in our program who practiced year after year after year taking off his coat and putting it back on never progressed beyond doing one sleeve by himself. Now he does it all -- and without prompts. He knows that when that coat is on, he's going out into the community.

A father reports: Going to the supermarket with my son was once an unpleasant experience. Now Chuck gets the cart and finds the items I show him in his picture book. He's happy and I enjoy being with him more than I ever did.

Oscar's mom loves having his class come to their home for domestic skill training; "A real home," she says, "sometimes even out of order," not the sterile laboratory of the classroom. Another young man, who once refused to walk for exercise, now takes the dog out daily. Because of the new school approach, his parents are also developing creative and expanded expectations at home.

Our children are motivated by their nonhandicapped peers. Jason spent seven years in segregated schools and never walked. Five months into this program, he was on his feet with his special friends, touring their elementary school playground.

Seventeen-year-old Ellen doesn't carry a Muppets lunchbox anymore; she wants a paper bag. Her mother is ecstatic; she hadn't realized how observant her daughter could be. Only in the typical setting -- in the integrated school -- is there something for her daughter to observe.

Oscar, 14, now in what his mother calls a "busy, alive school," is more self-confident and no longer hesitant about going into a new setting. He gets off his bus and walks into the junior high; no one checks him off, counts him in, and escorts him personally to his room. If he were to go in the wrong direction, one of his fellow students would be there to show him the way.

Our children learn from their nonhandicapped peers what they need to know to survive. David is 18, six feet tall, 210 pounds, nonverbal. His second day in the regular high school setting, David gave a nonhandicapped student a bear hug, his usual greeting back in the segregated school. It got a different reaction in the typical setting. "Bug off, fella!" his angry peer yelled -- or words to that effect. David, whose IQ measures somewhere between 15 and 20, has never hugged another student since. (How's that for generalization?)

Once thought unteachable, incurable, useless, our children are proving that given appropriate training in appropriate settings, they can and do learn. State-of-the-art possibilities are offering new hope. Each family has its own story.

Gillian, who was labeled autistic and attended a fine residential school from ages seven to 16, now hums in the high school chorus. Her mother reports that she is "coming out of her shell," can answer "yes" or "no" to a question, and is initiating speech.

Greg and Elise went to their Winter Ball together. Elise received her first corsage and danced with a teacher. Greg goes to the hockey games in his wheelchair with typical peers; his 15-year-old sister recently decided to go with him so she could meet his "cool" friends.

Terry is the waterboy for his high school football team. He doesn't talk and he doesn't hear but he sure can carry water!

Chris and Muriungi are outside their school every morning putting up the flag. They get to say "Hello" or nod to any latecomers.

Michelle collects attendance slips from first period teachers in her intermediate high school setting and takes them to the office.

Susan and Mary Elizabeth were honored for their contribution to their school at an awards assembly. They walked across stage to the cheers and applause of their schoolmates.

Eight-year-old Pedro's mother says the teachers at the segregated school tried their best, but now Pedro "walks in the door like any human being and sits down. The difference is the program." Pedro, by the way, was invited to a Halloween party by a special friend at school. They exchanged school pictures and Christmas cards, too. According to Pedro's mom, his siblings' friends feel a lot easier with Pedro these days.

Laura's family went to Disney World this spring, and she went with them. "We couldn't have done that before," her mother told me. "Now she fits in. Her 15-year-old sister will even go to the shopping mall with her. What this program has meant to us is that my daughter has the chance to participate in the real world of real people doing real things. She even looks and acts more normal."

Monica practiced for a week with everyone else for her elementary school holiday concert; she was on stage playing the bells. Her family felt a very real part of the school audience.

The father who scoffed at the idea of his nonverbal son getting a library card now takes that son and his two sisters to the library on Saturdays.

Families who once saw no problem with high-school-aged sons and daughters attending "Lollipop Concerts" and going on field trips every year to the zoo, now share stories about senior banquets and proms and yearbook pictures. I wonder if those of you who are not parents can imagine what it means to a family to see all their children's pictures in alphabetical order in the school yearbook. Until now, we have had a societal double standard. To go to segregated alternative centers from babyhood to adulthood is not just separation, it's devaluation. Think of the new message to brothers and sisters, to the community.

The mother of 17-year-old David writes of pride: "We have never been ashamed of him but neither were we ever really proud of him. Even more important -- I don't think that David was ever proud of himself. It took him so long to learn even the simplest things. Even his teachers earmarked things like dressing as an unobtainable goal. So I did everything for David and he didn't do anything for himself except play with his baby toys."

David is going out into the community now. He goes to a typical school and he interacts with nonhandicapped peers. He can do simple things. He's being taught a job skill. Here is a boy who couldn't do anything for himself and now he's doing something for others!

"I'm really proud of David and his accomplishments and, more important, David is proud of himself. I never thought that David was intelligent enough to have any feelings of self-worth. Boy, was I wrong."

Move a person with profound retardation along a developmental continuum? The best you can say about a continuum is that once you're placed on it, you continue-um to stay there.

Listen to the scenario written by an elementary school parent, Jesse's father, in a thank you letter concerning the program.

> *Sometimes our special kids don't walk real well. Sometimes they can't ask for what they need. But instead of other kids looking nervously at the handicaps of the "special" people, what if they see them as Sue or Tommy, the kid from school. For example, what if Sue rolls into the local McDonald's in her wheelchair. She can't talk, so she hands her picture cards to Mrs. Jones behind the counter. Mrs. Jones brings a cheeseburger, coke, and french fries to Sue, but Sue is pushing one of the cards with her wrist. Mrs. Jones can't understand; Sue is getting upset. WHAT IS MRS. JONES TO DO? WILL SUE EVER EAT AGAIN? Two places in line behind Sue is Bobby. He is one of the Special Friends at Sue's school. He knows that Sue always drinks orange soda (Sue's picture card didn't have the words written on it). Bobby tells Mrs. Jones that Sue wants an orange. Sue pays, Bobby moves up one space, Mrs. Jones closes the cash register, life goes on as usual. No big deal, right? Well, for Sue it is. She's a contributing member of*

the community. And in a way, it is for Bobby, too. In just a small way, today he became a bigger person. Instead of seeing Sue's wheelchair, he saw her as a schoolmate.

One day, sometime later, Sue comes into the Burger King. She smiles at Mr. Smith behind the counter. Mr. Smith says, "Hello, Suze. How was work today?" Sue rolls her eyes and sighs. Mr. Smith laughs. "Me, too," he says. He fills a bag for Sue, even though she hadn't ordered. She pays, waves, and rolls out. Mr. Smith, of course, is Sue's friend Bobby. He knew Sue in elementary, intermediate and senior high school. Every Friday after work Sue wants the same thing. And as manager, it's Mr. Smith's job to know what his customers want.

Craig comes into the Shady Grove Fairlanes to bowl with the class of students with severe handicaps from Damascus Elementary School. His bowling shoes are set out for him by the lady behind the counter. Craig takes this for granted. He doesn't know about sizes; neither did the lady behind the counter until she was taught. Years ago, someone else was behind the counter. That person taught Sue her job.

Once, the father who wrote the script I've just read, did not have this vision of what life could be for his child and others. He does now! He envisions a community that welcomes all its children. By challenging past assumptions and attitudes based on fear, we can expand everyone's world.

Because, you see, the interaction and learning of which I've spoken has an effect on others, as well. There's a fifth grader at Damascus Elementary who had adjustment problems. Jason was a loner. He joined the Special Friends Club to get out of class and he met Jesse. Jason is doing a lot better now; he's even coming to summer school in July because Jesse will be there. Affective education may not be spelled out in the curriculum, but it's being taught.

One of our high school English teachers says this program has been a "shot in the arm," the best experience the school has offered in 15 years. His honors students have an entire new framework to write about; the journalism club and the school newspaper are producing some pretty exciting stories. Now it's not only siblings who write about individuals with severe disabilities for the college application essay!

The issue of equity in a society bent on excellence offers a difficult challenge. My oldest daughter recently commented, "No one ever said life is a warm bath." I like that notion. Challenge keeps us alert, active, vibrant -- sometimes a bit chilly.

Continuing the same patterns, ideas, environments, justifying the status quo, is a lot easier than change. But when so many more exciting things can happen, when so many quality of life issues can be dramatically impacted, then staying where one is is to ignore the challenge of new opportunity. As a society we cannot afford to get stuck in the old and not explore the new -- particularly when those new directions are proving themselves in school districts across the country.

If you were to ask the question, you would learn that the majority of parents would like their sons and daughters with severe handicaps to spend their adult years in minimally segregated, heterogeneous communities, interacting with all their neighbors and fellow workers. How can our communities learn "acceptance"? What better place to start to make that happen than in our schools? Schools are where attitudes are formed, and where global changes can begin. You educators and administrators are the people who opened the doors of school houses to students with severe handicaps. Now you have the delightful opportunity to open minds.

And then we can all live together in a society that the artist-poet Judy Chicago describes this way:

And then all that has divided us will merge
And then compassion will be wedded to power
And then softness will come to a world that is harsh and unkind
And then both men and women will be gentle
And then both women and men will be strong
And then no person will be subject to another's will
And then all will be rich and free and varied
And then the greed of some will give way to the needs of many
And then all will share equally in the Earth's abundance
And then all will care for the sick and the weak and the old
And then all will nourish the young
And then all will cherish life's creatures
And then all will live in harmony with each other and the Earth
And then everywhere will be called Eden once again
Merger: A Vision of the Future

Take the challenge. Let us have hope. Give us the chance to dream -- for all our children.

BLUEPRINT FOR CHANGE [1]

MICHAEL HARDMAN

Chairman, Department of Special Education University of Utah

Good morning, everyone. It is a pleasure to be here in Indiana. I have a few objectives that I would like to accomplish this morning. First, I'm going to talk about human service models in the United States. In order to couch a discussion of change in terms of why we are doing what we are doing, we need to understand where we have been and what models have served to organize services in this country. I do emphasize this country, because human service models throughout the world do not reflect the way the United States has structured its human service system, particularly in the twentieth century. I want to spend some time just tracing through human service models that have evolved in the United States up until today.

Then, based upon some of these models, I'm going to ask if there are any validated assumptions for the continuation of segregated educational facilities in the United States. Is there anything that would validate the continuation of segregation? As we look at the United States, there is one last bastion of sanctioned segregation in the United States and that is the segregation of people with disabilities in the education system. It is the last sanctioned segregation. We know there are still other forms of segregation going on, but those are not approved forms of segregation, not social policy. Yet, within the United States, there is still an acceptance of segregation for students with disabilities. I think it is important to talk about that.

Then I want to take a look at what is constructive change. What do we know about constructive change if there is no validation for maintaining segregated school programs? What kind of things do we need to be aware of as we go through a period of change? I will focus on some of the things that we have learned from the racial desegregation literature, the procedures that have been used effectively to desegregate throughout the United States. Finally, I want to talk about leadership roles in relationship to that desegregation. Let's begin.

One of the things that I think is most alarming is that one of the biggest arguments to maintain segregated educational facilities is, "Hey, they're fine. Why rock the boat? Kids are learning in these facilities. Parents are satisfied with these facilities. Why is there a need for change?" Well, we'll talk about that.

[1] This presentation draws heavily from McDonnell, A. & Hardman, M. (1987) The desegregation of America's special schools: A blueprint for change. Salt Lake City: Department of Special Education, University of Utah.

Human Service Models

Let's examine a philosophical basis for service planning. We'll look at three human service models (Figure 1) that have evolved in the United States, and talk a little bit about them, what they mean, and what outcomes they achieve for people with disabilities.

Figure 1.

HUMAN SERVICES MODEL IN THE TWENTIETH CENTURY

CARE AND PROTECTION MODEL

Originally based on philosophy that all people with severe handicaps are physically sick and should be cared for and protected from society and that society should be protected from the handicapped individual.

OUTCOMES:

- primary intervention is medical care
- individual to be isolated from society in large facilities that are medically-oriented
- funding based upon medical criteria for hospitalization (medicaid)
- placement based upon availability of facilities not individual need

DEVELOPMENTAL MODEL

Based upon deviations in the course of development from what is considered normal physical, social, and intellectual growth.

First must establish what is normal development.

Compare handicapped individual's growth pattern to that of established normal development

Base intervention on developmental level of individual regardless of chronological age

OUTCOMES:

- intervention based more on individual developmental needs
- intervention focuses on moving individual in sequences or stages consistent with normal patterns of development
- intervention based upon getting individual ready for next developmental stage, and as such, individual may lock into a stage for long periods of time
- intervention may have no relationship to performance demands required for individual in the environment

ECOLOGICAL OR ENVIRONMENTAL MODEL

Based on philosophy that individual should be able to participate in social, economic, and recreational life of the local community

Must identify performance demands in actual community environments and remove barriers which interfere with individual's participation in community activities regardless of developmental level

OUTCOMES:

- goals and objectives developed from the demands of the community in conjuction with functioning of the individual
- intervention focuses on activities to be accomplished in community settings rather than on the development of isolated skills
- individual does not get ready to participate in community activities through isolation -- rather individual actively participates in community on an on-going basis

The first model that evolved in the United States evolved over a significant period of time. If we were to look at the structure of human services in this country, the major human service emphasis began in the mid 1800's. That emphasis was primarily an attempt to educate, truly, to educate persons referred to as "feeble-minded" to live in the community. Deaf individuals and people who were visually impaired were included in this group as well. We began by setting up schools. They were actually separate schools, not publicly funded institutions, but separate educational programs, not unlike what we have now, with an attempt to return the individual to live in their own community, and return to the family. These programs evolved from 1850 to about 1900; unfortunately, however, two things stifled their growth.

One was that there seemed to be a general view on the part of the public that we were supposed to cure people with disabilities. In other words, if you were going to do any kind of intervention or treatment with these individuals, then certainly you were going to cure them because everything evolved around a medical model. The only reason you would intervene was to cure the disability. Well, we were not successful curing people with disabilities.

The other thing that happened was the eugenics movement: There was a strong belief, with some supportive data though not very good supportive data, that these disabilities -- particularly the ones called "feeble-mindedness" and "insanity" -- were hereditary conditions, and that all such conditions were hereditary and were linked to social deviance. In response to that eugenic scare, three kinds of models began to evolve.

Initially we attempted to try to deal with this eugenic scare by stopping people with disabilities -- again primarily "feeble-minded" individuals and the "insane" --

from marrying each other. If you look at the Blue Laws of states at the turn of the century, you will find horrendous marriage laws that say that an individual who is insane or is an idiot can not marry. It's pretty interesting. If you found such people who married, you could have it annulled. You personally -- you did not have to be a member of the family. Some states had laws that basically said that, if you find out that an idiot has married, just let us know and we'll annul the marriage for you. Those laws stayed on the books for a number of years. It was also true that you could have people committed to "insane asylums" at that time as a member of the family without the permission of the individual. They were supposed to go in for a period of evaluation, but once they were in there, as a family member -- brother, cousin, second, third cousin -- you could have one of your family members committed to an "insane asylum". Now think about that. The chances of them getting out of that asylum were fairly remote during this period of time. We have some strong evidence that once you were in, you didn't get out.

Marriage laws did not successfully eliminate feeble-mindedness or insanity. Our concern was that they were still procreating, were still going to have children, and we were still going to have this "bad blood". (This was in the United States, folks, not off somewhere else; right here in this country.) Since we were still going to have this bad blood because marriage laws weren't effective, the next way to deal with it was with sterilization. That was the next phase which, at the time, was called "asexualization" or "asexualizing" people. We started a period of sterilization in this county. It is very alarming the number of people that were sterilized without permission and, often, without any strong rationale except for the label or the diagnosis of being "feeble-minded".

Well, there was some concern about whether sterilization was going to be effective, and there actually was a social conscience that was raised about who would and who would not be sterilized. With the advent of the intelligence test, we started to consider whether the IQ would be a good determiner of who should or should not be a parent, who would be a good parent and who would be a bad parent. There were laws proposed that individuals with IQs below 90 would be sterilized. Those fortunately were never passed or adopted by any state but you could see the approach. That began to scare people and we began to realize that we needed another strategy for dealing with people with disabilities.

That strategy was segregation: Deal with people who present a threat by isolating them from society. Since we did not have any mandatory education programs during this period, some school districts were doing some things with what we would call slow learners. Most parents had one of two choices. We said, "Go ahead, keep your son or daughter at home. There will be no education program for your son or daughter. There will be no medical insurance or assistance for your son or daughter. Basically, we're not going to provide any family support.

But we want you to know this, we want you to try as hard as you can to keep your child at home. If all else fails, we can put the child into one of these lovely places that we refer to as a colony." We actually didn't even call them schools at that time because most of them were medically-oriented facilities.

We began the advent to growth of institutions. Institutions for people with mental retardation. Institutions for people with mental illness. Even in looking at schools for deaf and blind individuals and their expansion during this period of time, they were still all operating with the segregated approach. For people who were referred to as feeble-minded, the approach was not going to be educational. The approach was going to be protection.

Care and protection. Protecting the individual from society was rationale number one. You know, we have to protect this individual from the larger society and the kinds of things that society can impose on this individual, and we need to protect society from the individual. Protect the individual from society, and protect society from the individual. That model was originally based on the philosophy that all people with severe handicaps were physically sick. You need to understand that, because that is why we were operating within a medical model. I feel very strongly that we need to understand that because we're still trying to deal with that kind of framework: The general public still regards people with severe disabilities as physically sick individuals who should be cared for and protected from society and that society should be protected from them. We isolated them by restricting them to their family. We did not allow them access to the community since we did not provide any kind of support for the individual to get into the community. However, even at the peak of institutionalization, the vast majority of families kept the individual home, regardless of the severity of the handicapping condition. We never reached the point in this country where more than 10% of the total population of people with severe disabilities were served in institutional programs. Think about all the families that kept their children at home for so many years with little or no support whatsoever.

Operating within a medical model, the institutions actually were medical facilities. All institutions initially were medical facilities. The individuals who resided there were referred to as patients. Physicians ran the facilities. Many states had laws that said that these facilities definitely would protect society from the individual because they would be located at least 300 miles away from the closest populated area. Those are in the laws. Those are on the books. You will locate; you will isolate; you will protect.

The primary intervention in the care and protection model is medical care. The individuals will be isolated from society in large facilities that are medically oriented. Funding is based upon medical criteria. This is what is so difficult for us right now, because we are trying to bring about a stronger social emphasis on accessing federal dollars to expand our community programs. Yet for years and years and years, all the money has been devoted to a medical orientation. We don't understand why we're having such difficulty. Well, the fact is that it all comes back to this care and protection model. We convinced the federal government for so many years that we needed to care and protect these individuals; that is what the federal bureaucracy understands.

Medicaid. Medicaid stands in the way of the development and expansion of community programs in this country, yet it is the only major source of money that we can access to expand our community programs. The support for educating handicapped children is minute compared to what we put into Medicaid services. Unfortunately, we can't seem to get out of the care and protection model with that.

The placement is based upon the availability of the facilities, not upon individual needs. The medical model has forced us into what definitely must be called a facilities-driven system. I want you to think about the larger social picture and the fact that the care and protection model has forced us into a facilities-driven system because education is a microcosm of this system. When education for more severely handicapped people was transferred into the education system, what we literally did was transfer the model. Initially we transferred the model because we simply transferred facilities. Many of the facilities that are now operating in this country as segregated educational facilities were operating before the mandate for public education, and we simply just picked up those facilities which were welfare facilities or social services facilities and we moved them into the education system. Now we have a facilities driven-system. My view is that we are still in a facilities-driven system in education right now. The so-called continuum of services is, in reality, very much a farce. Although the law mandates a continuum of services based upon individual need, the facilities are driving the service system, not the needs of individuals, because we have facilities that have to have people in them in order to be maintained.

We hear the argument, "We need to maintain segregated educational programs because they are a part of the continuum." That's not the issue. The issue is how you go about determining individual need according to the law: You start with the regular education classroom, and every movement away from that regular education classroom must be justified. You must clearly document why a student should be moved into more restrictive environments. However, what we find in the education system is that, because we have facilities -- separate facilities -- out there, we are forced to fill them. In the state of Utah, for example, 75% of the students who are severely handicapped are in segregated educational facilities. We did a study of those facilities. In order for those facilities to be cost effective, they have to operate at 80% capacity all the time. Now you tell me, even if we could document that a child needs a placement in a regular school, can we let those special facilities go unfilled? Of course not; that's very naive. We're going to keep putting those children in those facilities because the school districts see that they have to have a certain number of children in them in order to be cost effective. So we keep doing what I refer to as automatic placements. There are many, many automatic placements based upon the facilities-driven system. That's where the care and protection model has taken us.

One of the things that helped us move out of the care and protection model was the developmental model. The developmental model was recognized in the 1960's and 70's and was a basis for focusing on education. The developmental model was based upon looking at the individual in relationship to deviations from normal development. It redefined education in the public schools. It redefined education from being one of reading, writing, and arithmetic to one of beginning where the child is functioning. You will look at where the child is functioning in relationship to a developmental framework and, regardless of how low that functioning level is, you will provide an educational experience.

The developmental model was based upon deviations and the course of development from which is considered normal physical, social, intellectual growth. First you must establish what is normal development. So we began to look at normal development and to identify the discrepancies. We compared handicapped individuals' growth patterns with those of established normal development. It all made a lot of sense. It allowed us to look at how we would develop a curriculum that was skill-oriented and that would close the gap. This is basically what the developmental model attempts to do -- close the gap between the individual's functioning level and what is considered normal growth and development. The intervention is based on the developmental level of the individual regardless of chronological age. It is a very positive approach. However, it contains some drawbacks. Let's look at the outcomes in the developmental model.

Over the last 10 years, I think it is very clear that special education has been very effective in developing procedures. We have some great processes out there. Teacher education programs focus very well on the process of educating students, how to develop programs, how to implement those programs, but rarely look at the outcomes for students within those programs. We primarily operate on a day-to-day basis without examining long-term outcomes. In terms of outcomes for the developmental model, the intervention is based more on individual developmental needs. The intervention focuses on moving the individual in sequences of stages consistent with normal patterns in development.

This is the key. If you truly stick to the developmental model, you, in fact, will start with what is normal development. If a child is not walking, you will sequence back and do a task analysis of what it takes to get the kid to walk because it is normal to walk. Because the developmental model says what you're trying to do is close the gap between the functioning level of what is normal, you're closing it by using developmental sequences. The intervention is focusing on those sequences. Intervention is based upon getting the individual ready for the next developmental stage, and, as such, the individual may lock into a stage for long periods of time. This is where we see the problems in special education. We have individuals who come through the education system from birth through high school programs who have some difficulty if you stick to the developmental model. The individual locks into stages.

This rationale is why we still see developmental reading programs in high schools, we are still teaching the individual to read even though the kid is 16-years-old and has substantial handicaps. We never ask, "What are the outcomes for this student even if he or she shows some progress in reading? What will be the outcome? How will reading be used as a tool? Will the individual be able to use this as a tool as an adult?" We do not consider the practical utility of that academic area. Consider speech -- talking. That's another developmental skill - - everyone learns to talk. Is that really the issue for many people with severe disabilities, or for nonhandicapped people? The real issue is communication. But if you stick to a traditional developmental framework, what you do is you get locked into stages. We see other kids who have been in self-help programs that are strictly developmentally focused. They make progress, but there are no usable skills. The probability of it ever being usable in relationship to the demands of their community is very, very remote. The intervention may have no relationship to performance demands required for the individual in the environment.

Though there are some good aspects to it, there are problems with the developmental model. The isolated skill training has no relationship to the environment.

The model we have been looking at most recently is the ecological or environmental approach, shifting concern to the demands required of an individual in the environment, regardless of his or her age.

The data on generalization and skill transfer says that we will have to teach skills in natural settings, across several different people, and across several different settings before the individual has the skill as a usable skill. The ecological or environmental model is based on the philosophy that the individual should be able to participate in a social, economic, and recreational life of the local community. It is very much an outcome rather than process orientation. The ecological model emphasizes that the issue is not the process of getting the individual ready; the issue is that outcome will be realized: (1) the individual will live in the community, (2) he or she will participate in the social life of the community, and (3) there will be work. That's what we start with. That's where we begin.

In order to achieve those outcomes, we must first identify the performance demands in actual community environments and remove the barriers which interfere with the individual's participation. We are going to go out and look at the performance demands in the community where the student lives. The likelihood is that this student will probably also live in the same general area as an adult.

This community-referencing is very important because performance demands are very different in urban, rural, and remote areas. You will never see a published curriculum that can deal with this. Under the ecological model, what works is understanding what the performance demands are for the individual where he or she lives, in the natural setting. So the role for the teacher changes dramatically to of one of understanding what goes on out in the community, then looking at what goes on out in the community in relationship to the individual's functioning, then looking at what the barriers are to that individual getting into the community. The goal is not to get the individual ready: The goal is to get rid of the barriers.

The excuse that keeps us out of integrated settings in public schools and community settings is that we say, "Well, there are lots of barriers here, and the problem is the kids. So what we have to do is to get the kids ready so they can overcome the barrier." You know, when we look at putting the individual out and look at how we can remove that barrier for access, there is only way to do that and that's immediate access to that environment. Immediate access.

We know that we cannot train effectively in an isolated setting for a transfer into a natural setting. It does not work. Even simulations which can enhance generalizations do not work alone. We have done a lot of different things to create simulated experiences. We know that a good classroom simulation is better than worksheets or just talking about it in the community, but we also know that if you want the individual to participate in the community, nothing is more effective than training in the natural setting if you want the individual to participate in the community.

Another important aspect of the ecological model is that you advocate an individual's participation in community activities regardless of his or her "developmental level." You do not say, "Because this individual is developmentally only six months of age, he is not going to go out into the community." Under this model, you don't do that. The outcomes for an ecological model are: (1) goals and objectives that are derived from the demands of the community in conjunction with the functioning level of the individual, (2) intervention which focuses on activities to be accomplished in community settings rather than on the development of isolated skills, and (3) active regular participation in the community rather than an emphasis on readiness. That is the ecological framework.

If our outcomes for students with severe handicaps are the kinds of things that are under the ecological model -- personal autonomy, social participation and acceptance, economic self-sufficiency, -- what do we know then about environment and education?

There have been many professionals over the years who have argued that environment is not an issue; it's the curriculum that is the issue. I would argue that certainly environment is the key issue, and curriculum, under the ecological model, evolves from the environment. The traditional approach is to develop an IEP within the classroom, implement classroom programs to meet the goals, and just hope that you build the kind of educational experience that will generalize out to the natural setting. Under the ecological model, you begin with what is going on out there in the real world and the IEP is structured from the environment back to the classroom.

In our elementary models, one of the things that we're looking at is what we call a peer-referenced curriculum rather than a community- referenced curriculum. What we are saying is that for an elementary-age child, the immediate and probably most accessible community is the school. So we look at the school structure for the elementary-age child. We look at a peer-referenced -- not handicapped peer-referenced but nonhandicapped peer-referenced -- approach. You look at the individual child in relationship to the immediate community, the school, and the family. In high school, what you do is you're expanding out from the individual to the family, to the school and into the general community. So, regardless of the age of the child, I would say there is an emphasis toward getting the child out of the classroom and interacting in a larger environment.

Integration is not a goal; it is a means to achieve a goal. The goal is social participation and acceptance. What we know is that you don't get social participation and acceptance without integration -- interaction between nonhandicapped and handicapped individuals and access to the community. There are many people who are still operating in the care and protection model. Their outcomes relate to caring for and protecting the individual, not enhancing community participation and acceptance.

What we know about segregated educational environments can be captures in one sentence: "Segregation prepares people for segregation." That's it. It does an effective job of that. But it prepares people for other segregated environments. That is not what the outcomes are under an ecological model.

Justification for Separate Schools

Let's look at some assumptions about segregated educational facilities and see if we can find anything here that validates the continuation of segregated educational programs. What you see here (Figure 2) is a series of unvalidated assumptions supporting segregated, special school educational placements for severely handicapped students. The references here are not references that support the assumption.

They are simply references that say where the assumption appears in the literature without any support. In other words, we see all these citations in the literature that talk about why we have segregated educational facilities. If you had looked at those references, they're not studies. They're simply saying, "This is an assumption. This is why segregated educational programs exist." These assumptions are broken down into three major areas.

Assumption of Educational Superiority

Many individuals assume that segregated educational programs are superior to integrated programs. And by the way, under the law, under LRE, they had better be superior. Right? They had better be, not just be equal to, but superior in order to justify removal from the regular environment. You hear people say, "If the opportunity is just as good in a segregated facility as it is in an integrated program, what's the fuss?" Well, if it's "just as good," then they better be in the integrated program because LRE requires that. You have to show a superior educational opportunity as you move away from a regular class and regular school environment. Every change out into a more restrictive environment requires that that next environment not be equal to, but be superior to the previous less restrictive environment. In order for special schools or segregated facilities to continue to exist in this country, they had better demonstrate their superiority. Let's see if they have.

The arguments presented that superior educational opportunities are offered in segregated school programs fall under three major headings: a) the intensive service needs of severely handicapped students can best be met in a special school setting, b) homogeneous grouping facilitates appropriate instruction, and c) specialization of staff roles, facilities, and materials will enhance skill development. All of those are assumptions about why we continue segregated programs.

Figure 2.

UNVALIDATED ASSUMPTIONS SUPPORTING SEGREGATED (SPECIAL SCHOOL) EDUCATIONAL PLACEMENT FOR SEVERELY HANDICAPPED STUDENTS

1. Superior educational opportunities are offered in segregated school programs.

   a.Intensive service needs of severely handicapped students can best be met in a special school setting (e.g., Certo, 1983; Rostetter et. al., 1984).

   b.Homogeneous grouping facilitates appropriate instruction (e.g., Brown, Nietupski & Hamre-Nietupski, 1976; Donder & York, 1984).

   c.Specialization of staff roles, facilities, and materials will enhance skill development (e.g., Donder & York, 1984; Drew, Logan & Hardman, 1984).

2. There are unavoidable drawbacks and risks to providing services in integrated programs.

   a.Provision of related services (e.g., physical therapy) will decrease in quality and quantity (e.g., Donder & York, 1984; Hamre-Nietupski,Nietupski, Stainback & Stainback, 1984).

   b.Handicapped students will be teased and mistreated by their nonhandicapped peers (e.g., Hamre-Nietupski et al., 1984; Schrag, 1984).

   c.Handicapped students will be resented, rejected, or at best, ignored by their nonhandicapped students (e.g., J. McDonnell, 1986; Schrag, 1984).

   d.Special education teachers will not receive peer support and qualified supervision (e.g., Donder & York, 1984).

3.The consumer satisfaction, administrative convenience, and efficiency of segregated school programs make change an unnecessary disruption.

   a.Parents are happier with special school programs (e.g., J. McDonnell, 1986; Schrag, 1984).

   b.Barrier free environments are needed by severely handicapped students and it would be too expensive to convert regular education buildings (e.g., Hamre-Nietupski et al., 1984; Schrag, 1984).

   c.Provision of services in integrated settings will be more expensive (e.g., Certo, 1983; J. McDonnell, 1986).

   d.A district which has a continuum of special education placement options fulfills the legal environment of educating students in the least restrictive environment. The fact that all severely handicapped students are located in segregated service settings is justified by their educational needs (e.g., Rostetter et al., 1984).

Note:Assumptions are given in referenced articles as commonly used rationales. They should not be interpreted as authors' own opinion.

Consider the first assumption: that the service needs are so great that students with severe handicaps have to be placed in a segregated environment because we could not provide those services in a regular school. Second, one of the reasons we have to segregate the individual is to create a volume or homogeneous grouping so that all students start to look alike and so the instruction can address students of similar needs. Any of you that are teachers of severely handicapped students know what a myth that is: There is no such thing as a homogeneous group of severely handicapped students. Third is this whole idea of the specialization of staff roles that says, by having specialized roles, facilities, and materials, we will provide a superior educational opportunity.

Are any of those validated in the literature? Do we have any studies whatsoever that validate any of those assumptions? Not one. Please, if you have one, I'd love to see it. We have nothing in the literature that would validate any of those assumptions about segregated educational programs. Well, so much for the superiority, at this point at least, of segregated educational programs. There's nothing that indicates they are superior in any way.

The research that we do have available basically talks about the fact that, at worst, integrated programs are equal to, in their outcomes, segregated educational programs. Most of the literature, however, says that integrated programs are far superior in the outcomes that I just got through describing. Segregated facilities are not even superior, folks, in care and protection.

Assumption of Risk in Integrated Programs

A second rationale for continuing to segregate students in special facilities is that there are unavoidable drawbacks or risks in providing services in an integrated program. Let's look at those risks.

One presumed risk is that the provision of related services will decrease in quality and quantity as you move into integrated programs. You will hear that argument made to continue segregated educational programs -- that related services can't be provided adequately in an integrated school.

A second presumed risk is that students with handicaps will be teased and mistreated by their nonhandicapped peers. There is no nonhandicapped social support system out there, and, by putting them out there, you're putting them at risk because they'll just be ridiculed. It's better to be in a safe environment away from nonhandicapped peers so that they don't have to deal with the frustrations and the lowering of self concept in relationship to having to deal with their nonhandicapped peer group.

A third risk is that students with handicaps will be resented, rejected or, at best, ignored by nonhandicapped peers and the parents and educators of nonhandicapped students. Finally, special education teachers who operate in segregated educational facilities make the argument that they will not receive peer support and qualified supervision. In other words, by moving teachers out, they would lose all of their handicapped support system.

We find that basically none of these presumed risks are validated in the literature. Not one. You can't find any evidence that indicates that we can't effectively provide related services on regular school campuses. We can probably find evidence that we're not providing related services. We can find that. But do we have the models? Do we have the knowledge? Do we have the instructional technology to deliver related services in integrated settings? You bet your life we do. Is it more costly? There's no evidence of that whatsoever, either. As we look at them, in many of the integrated programs that we're operating, cost is not more. There's no evidence whatsoever that it costs more to operate related service program through an integrated service delivery system. What it does require is a change in the way we provide those services. It does change the model of service delivery.

But will the outcomes that we want still be achieved through the provision of related services that are more oriented to the community- referenced approach? The answer is yes. Part of the problem with our provision of related services is the clinical orientation. Again, if you come back to what I was talking about, we can't effectively work with students with severe handicaps in an isolated skill development approach; unfortunately many related services are tied to isolated skill development approaches. Consequently, as we change the related services approach along with the educational approach to outcomes that focus on getting the individual into a broader community base and socially participating, then obviously we see that the traditional clinical approach won't work. Related services have to operate in the ecological model in the same way that educational services operate. The point here is, will they operate, can they operate? Yes. There are models out there. We know how to do it. We can do it and we can do it effectively.

There is no data base to support that students with severe handicaps are being teased and mistreated. They say, "Wait a minute, I know we've got data on this. We've got data. We've got testimonies from parents about mistreatment." I've talked with many parents about the issue of mistreatment. Let me tell you basically what we know, at least from our programs, at this point. Yes, there is a level of mistreatment. The point is, the mistreatment, or basically the verbal abuse if you want to call it that, is no different in integrated programs than it is in segregated programs. The only difference is that, in segregated programs, it's other handicapped kids who are being abusive. It is like you are saying, "Well, it's OK to be verbally abused by another handicapped child, but it's not okay to be verbally abused by a nonhandicapped child," because the level of verbal abuse is the same across integrated and segregated programs. There is no question that it takes place in both of those settings. It is part of the social phenomenon related to difference and we do see it. However, what we also see in an integrated setting that we do not see in segregated settings is that there is also a strong nonhandicapped support system that overrides that small amount of mistreatment.

A nonhandicapped support system includes out-of-school activities. In relationship to out-of-school activities in our program, participation is with a nonhandicapped person as a peer tutor. Our peer tutors have responsibilities, one of which is to go to an out-of-school activity with a student with a severe handicap once a quarter. For the first two years of our project, we were only at the artificially imposed level of after school integration. We told kids that they would go out or they would get a bad grade, so they go. "Oh, I'll go out. OK. I'll go out." With that artificially imposed integration, you might expect that kids would only go out once a quarter. However, the average number of out-of-school activities for our students in the first two years is between three and four times a quarter. What does that say? It says that we have moved beyond artificially imposed integration to spontaneous integration. We are not requiring peer tutors to be that active; those extra two or three times are not required. We are moving into that spontaneous integration, but we know we have to do it through artificially imposed kinds of activities.

What about the concern that special education teachers will not receive peer support or qualified supervision when they move out of a segregated setting? Naturally, that could happen, but it is not necessary. There are many ways to set up peer support systems for special education staff within integrated programs. One of the criteria for our integrated programs is that we will not allow clustering of special education classrooms within the regular education building. We simply do not allow clustering because it creates a segregated special school atmosphere in the regular school. This has upset some of our teachers because they say, "Gee, I need my colleagues." This is a problem in special education today because we fail to remember that we are educators first, not special educators first. We are educators. This means, in order for special education to survive in this system, we are going to have to be viewed, first and foremost, as educators. You must connect within the larger educational system. I don't care what functioning level your students are, you must connect into the regular education system. You must be a part of it. Nothing exemplifies how isolated we've become as a profession better than the educational reform reports, which basically have ignored special education. They don't talk about special education. Are they ignoring us? You bet. Have we allowed ourselves to be ignored? You bet. Is it the same kind of structure we do with kids? Have we allowed our kids to be ignored? Yes, we have. We have set up a macrostructure in special education that basically sets us apart from the general education system. I'll tell you, in times of fiscal constraint and as districts start to look at how they provide their services, anything that stands out like a sore thumb is going to be cut off first. And special education stands out that way. What we have to do is incorporate ourselves back. I'm not talking just about the regular education initiative: I'm saying that, as a profession in general, we have to connect back in to the system as educators.

Assumption of Consumer Satisfaction

A third assumption holds that special schools, or segregated educational environments, are justified because consumer satisfaction, administrative convenience, and efficiency of segregated school programs make change an unnecessary disruption. We do not need to disrupt what is already going on out there. We have strong consumer satisfaction in special schools. They are convenient. Why do we want to change it? It's unnecessary. You hear this time and time again. There's no need to bring about change. Everybody is happy. Let's consider whether a) parents are happier with special school programs, b) barrier-free environments are needed by severely handicapped students and it would be too expensive to convert regular education buildings, c) the provision of services in the integrated school setting would be more expensive and, therefore, administratively unwise, and d) a district which has a continuum of special education placement options fulfills the legal requirement of educating students in the least restrictive environment. The fact that all severely handicapped students are located in a segregated service setting is justified by their educational need.

Do any of these have any validation in the literature? Well, guess what: Two of them do. By the way, none of these, as you can see, is child-centered. They represent purely administrative concerns. If we continue special schools, let's get real clear about it. If we're going to do it, we're going to do it for administrative reasons. We're not going to do it because it's a benefit to children. There is no justification in terms of benefits to children that I can find anywhere in the literature. We can't find any child benefits in segregated schools. There might be several administrative benefits, although we think those are exaggerated as well.

The two that have some validation, as you might guess, are a) and b). Parents are happier, although I would not use "er". I would say parents are happy with special school settings. And, the barrier-free environments are needed, and may not be available in all regular education buildings. Well, let's first look at the assumption that parents are happy.

We've conducted a major survey of parents who have children in integrated and segregated settings in the state of Utah. (John McDonnell conducted the study which will be published in Education and Training of the Mentally Retarded, within the next several months.) It looked at consumer satisfaction in integrated and segregated environments along with a lot of other factors. What we found was that parents of children in segregated schools are very happy with the services. What is seldom acknowledged, however, is that parents of children in integrated settings are equally pleased. We found absolutely no difference in consumer satisfaction in integrated and segregated settings. None. In other words, they are not happier, but they are happy. So, you can look at the two and say that consumer satisfaction is a wash, because there are no differences between integrated and segregated settings in terms of parent satisfaction. However, it does not remove it as an issue. If the parent is pleased with the segregated setting, what is it that makes them pleased?

For some of the parents we've talked to, it is the care and protection issue. Then we ask them, "What is it that you want for your child as an adult?" Then they start talking about, "Well, I want social participation. I want my son or daughter to live in a group home. After a period of time, I want some removal from the family. I still want interaction, but I want removal." Then we ask, "Do you know that this setting isn't going to do the job for you? What this setting will do is basically prepare your son or daughter to continue in isolation, to continue all the way into adulthood, not only isolation in community, but in work because the best that you're going to find is that their work environment is also a segregated work environment." The issue is, do you believe in these outcomes? If you want certain outcomes, school integration is critical. By the way, there are some parents who will say, "No, I don't want those outcomes. I want care and protection."

Barrier-free environments. Is it true that some students require some environments that are barrier-free? The answer to that is yes. The best estimates that we can find on barrier-free environments show that the percentage of students with severe handicaps that need barrier- free environments is about 25%; therefore, 75% of the students with severe handicaps do not require barrier-free environments. What about that 25%? Well, our view is, that's exaggerated because we have attempted, when we talk about barrier-free environments, to cluster more physically handicapped students. We have tried to get the more severely handicapped students into what we call homogeneous groups, and to locate them in a school that will meet the physical management needs of the individual.

Well, in looking at some of our programs, what we're saying now is, first of all, we will not cluster more severely, more profoundly multiply handicapped individuals because, when you cluster those individuals, you create a massive management problem. What you have is an incredible burnout of teachers who deal with profoundly, multiply handicapped individuals. Is that burnout cognitive? I don't think so. I think that burnout is physical from having to move and manage these children. When you cluster them, consider what it takes to manage 12 to 15 students with profound handicaps.

We can't keep teachers in those classrooms. We are attempting now to pull those kids out of those classrooms and into heterogeneous models where maybe only one or two of the students are profoundly, multiply handicapped; where there is a support system of able-bodied people -- other handicapped students as well as nonhandicapped students -- to deal with the physical management needs thus reducing demands on the teacher. Dealing with the needs of one or two very physically involved individuals is quite different from managing an entire class that requires continuous physical assistance for virtually all activity. Does the instruction go down? No. What about medical needs? Are we able to meet the medical needs of medically fragile individuals in those regular education programs? We are able to meet them as well as the special school. Special schools are not hospitals. If the individual is in school, is there any reason why he or she would be in a special school versus a regular school in terms of his or her medical needs? We haven't been able to find any. Yes, it takes some management issues that we have to put in place. It's a barrier, folks. We viewed it as a barrier, and we have found ways around the barrier that have not affected the instruction. In fact, it's been more beneficial to the students. They have a different peer-oriented system. Their peers are not other profoundly, multiply handicapped individuals.

So, as far as any of these assumptions, we just haven't been able to find anything that indicates that there is a superiority in segregated educational placements, that there is a drawback to integrated placements, or that administrative issues warrant the continuation of special schools. The only indication of why we continue these school programs is that the system is driven by the facilities, not by the needs of individuals. If we all would come clean on that then we may be able to move forward. What we need to very clearly say is that the facilities are driving the system; kids are not driving the system.

Systems Change

Let's take a look at what we know about effective change. If you accept the fact that we are moving into an ecological service model with an orientation to the outcomes of social participation and community access, then we need to go through a massive system change, because 49 out of 50 states in this country continue to operate segregated educational programs.

In the state of Utah, for example, 75% of all students with severe handicaps are in segregated educational programs, while 90% of those students between the ages of 18 and 21 are in segregated programs. How do we move forward? What kinds of things do we do? What can we learn from the literature on how to bring about effective change? We do have some sources. One source is the racial desegregation literature and a second is looking at systems -- states, local school districts -- that have effectively implemented change.

Figure 3 summarizes what we know about effective racial desegregation. What I mean by effective racial desegregation is that there is clear evidence that students are succeeding in integrated settings and that there is interaction between those who are culturally different and their Caucasian counterparts. First of all, we know that in those school districts and states that have been effective, there is an immediate recognition of the inevitability of change. The question is not whether it will happen, but the details of how it will happen.

Figure 3.

PRINCIPLES OF EFFECTIVE RACIAL DESEGREGATION

- Recognition of inevitability reduces the debate regarding the desirability of desegregation.
- As a goal for the education system, desegregation has been most successful when viewed as voluntary.
- Strong unequivocal leadership by the school board and superintendent is critical in achieving effective desegregation with minimal controversy.
- Simultaneous implementation of desegregation is preferable to phase-ins or other sequential plans which only delay acceptance of inevitability and allow the opposition to organize.
- Concentration should be on changing behavior, attitude change will follow.
- Organizational and interpersonal support are needed to sustain change.

A second important feature relates to desegregation being voluntary. When it is effective, it is also voluntary. Does that mean we must have full consensus on this before we make a move? No, but I'll tell you that there will have to be some strong consensus at the administrative levels for change to be effective; this will come up later. When we talk about voluntary, the most effective systems change have not been through court order. The most effective have come through districts that have initiated the change themselves. In some cases we have been forced to go through the courts, but the literature on racial desegregation indicates that is not as effective as when school districts do it themselves, and do not wait around for th courts to tell them to do it.

What we have found in the literature is that effective desegregation takes strong, unequivocal leadership by the school board and superintendent and simultaneous implementation of desegregation. The most successful desegregation programs are programs that are systemwide. They are district-wide. I think we've looked at some of the literature in racial desegregation where there were models that were in place. In other words, small models -- some classrooms in schools, some schools that had been racially desegregated, and some classroom teachers that had taken it upon themselves to set up a model for racial desegregation. Those models were not being generalized as effectively or efficiently as we would have hoped.

That brings us to what is going on in special education. We have many models out there for effective integration of students with severe handicaps. Part of the federal initiative in transition and in LRE has been to develop models. While I am very supportive of model development, we must realize that models are only a piece of the systems change puzzle and that many times there will be no generalization of the model within a district because of other factors. In school districts where we have been the most successful with expansion and generalization of model programs, we have found that district policies and procedures -- the whole way the district operates -- is changed as well. Where it has not been effective is in school districts that believe they can operate two parallel systems; that is, in districts that see the effectiveness of the model, but they also want to continue to operate their special schools. Those districts can only expand as parents demand the change into the integrated program. It is going to take a much longer period of time when you have that kind of a system than a system that has good strong administrative support from the beginning.

Concentration should also be on changing behavior. This is what the racial desegregation literature says. Change behavior; attitudes will follow. One of the things that we do right now is work a lot on attitudes. We have many programs that deal with changing attitudes about students with handicaps. That may be all well and good, but why don't we look at what has happened. There is a relevant body of literature that tells us something about dealing with attitude change and that is in the expansion of group homes in the United States.

Let's look at that for a minute. Why are we still having trouble establishing group homes in neighborhoods? Gee, it's amazing we're still having problems with group homes, isn't it? Especially since most of our severely handicapped individuals are isolated all during school, then all of a sudden you see them in the neighborhood. We know you didn't grow up with these kids. We know you don't see them much, but now they're adults and they're going to live in your neighborhood. That's OK, isn't it? People basically have a very suspicious kind of attitude, "Why are they isolated all during the school years, and now they're coming into my neighborhood? I don't get it." I think the questioning, less-than-enthusiastic reaction is pretty logical myself. I think it's human nature to react and be suspicious of people that we know very little about.

What have we found in the group home literature? Primarily, we have found that efforts have focused a great deal on attitude change. What we do when we want to move a group home into a neighborhood is start by going into the neighborhood and "educating" the neighbors -- before anybody moves in. We go in, hold meetings, and talk to all the neighbors about how these people are OK; we try to fix attitudes before people with disabilities ever move into the neighborhood. All we've just succeeded in doing is raising some very big red flags; basically, we set up failure for that group home. We gave the neighbors ammunition.

That's changing attitudes. How do you change behavior? You move the group home in, and you answer questions later. Period. You move the group home in. You get it all structured and set up, and then you deal with any problems in the neighborhood. And there will be problems. I'm telling you the same thing is true of the schools. You move the kids in, and then you start to change behavior. You provide opportunities. Deal with behaviors; attitudes will follow. You cannot change behavior through just attitude readjustment. It just simply doesn't happen.

You know what else we found out about group homes? We're pretty successful. We're successful when we move them in. Our problem is not with existing group homes in this country. They're doing very, very well. There is little evidence that group homes are being asked to leave after they have been established, but we are having a time getting homes into neighborhoods. I think the problem is that we try to deal with attitude adjustment. In the same way we can not prepare handicapped people for nonhandicapped people in isolation, you cannot prepare nonhandicapped people for handicapped people by talking about it. Enough talk. We've got to do something about it.

Finally, you have to have organizational, interpersonal support to sustain the change. Once you've made the change, there must be an organizational system that will maintain that change. Based upon the racial desegregation literature, let's take a look at some things that we need to be aware of (see Figure 4).

First of all, as I have said, we need to develop an overall change strategy, a system-wide approach. Focus on making it happen, not debating whether it should happen. Given the complexity of the educational needs of students, change must be done in a comprehensive and well conceived manner. Start with a good solid plan that deals with implementing policies and procedures and that articulates clearly the benefits to students with severe handicaps. It is also important to acknowledge where the problems will be. It is very, very unfortunate when we only talk about the fact that this will work; we must also acknowledge where the problem areas will be.

Figure 4.

GUIDELINES FOR IMPLEMENTING EFFECTIVE CHANGE THAT WILL SUCCESSFULLY PLACE STUDENTS WITH SEVERE HANDICAPS INTO REGULAR EDUCATION ENVIRONMENTS

1. Develop an overall change strategy that focuses on making it happen not whether it should happen -- given the complexity of educational needs for these students, change must be handled in acomprehensive and well-conceived manner.
2. Be able to clearly articulate the benefits to students with severe handicaps as well as acknowledge the logistical issues without overstating the problem.
3. Implement change on a simultaneous and district-wide basis. -- This minimizes resistance and facilitates comprehensive planning.
4. Top level support is essential to successful integration -- any change in status quo directly effects administrators, teachers, and parents,but can be minimized with a clear directive from central administration.
5. Involve community leaders, parents, professionals, and advocacy groups in designing the change strategy -- effective change can be initiated as well as supported at the grassroots level through parentsand teacher advocacy.
6. Place students as close as possible to their own neighborhood school.
7. Emphasize maintaining/improving quality of services while being flexible about ways in which they are provided.
8. Actively plan for integration not just physical proximity.
9. Build in feedback and evaluation mechanisms
    - to what extent does interaction with nonhandicapped peers actually occur ?
    - Do you continually reassess staff development needs ?
    - Is there a means for assessing consumer feedback on a frequent basis to facilitate proactive problem-solving strategies?

Implement change simultaneously across a district to minimize resistance. Top-level support is essential to successful integration. Any change in the status quo directly affects administrators, teachers, and parents, but disruption can be minimized with a clear directive from central administration. Involve the community -- professionals, parents, general citizens. Remember, involvement is not simply dealing with attitude change. Involvement is sharing what you are going to do, and how others can help you do it effectively. The debate is not whether we're going to change; the debate is how we do it. Don't debate whether; debate how -- and solicit strong input from the community.

Place students as close as possible to their own neighborhood schools. If it is not possible to go to the neighborhood school, get as close as possible to the neighborhood school. Why? First of all, it is important that the neighborhood school -- where the kid would go if he or she were nonhandicapped -- takes the responsibility for its students. There is a much greater chance of ownership of and responsibility for children who are handicapped if they live within the attendance area of the school they attend. When they come to school with the rest of the kids in the neighborhood, they are a part of the neighborhood structure. The parents live in the neighborhood area. A second important reason to focus on the neighborhood school is all after school activities take place with nonhandicapped peers who live in the same general area. Maybe a neighborhood placement will not always be feasible, but it is important to focus on the neighborhood schools first and foremost. The goal is not just an integrated school per se; it is keeping the kid in the neighborhood school that is age-appropriate.

We are going to be implementing two programs next year that are totally neighborhood school programs. Already we find that the support from the principals is very different because we tell them, "This kid lives here, four blocks down the road. These kids live in this area." There is an immediate relationship for the principal. The same thing is true with the kids who see this handicapped child everyday in the neighborhood anyway. Try to work on the neighborhood support. By the way, the law says that is what you are supposed to do. The law very clearly states that the neighborhood school is the school of first choice.

You must focus on quality. Don't get the idea that when students are transferred from a segregated to an integrated building, that the job is done. That mentality guarantees failure. Being in an integrated setting is only the beginning. There must be a system in place that creates interaction and opportunities. Location within the school building is critical. I'm sure you're going to hear that over and over and over again. Location within the school building is critical. Don't isolate these kids by putting them in a wing of the school, away from the main traffic area. Location is essential and the relationship with nonhandicapped peers is essential. Don't create any cluster kind of a situation and minimize physical isolation.

Actively plan for integration, not just physical proximity. Build in feedback and evaluation mechanisms which measure the extent of interaction with nonhandicapped peers which actually occur. Are you able to really look at the interaction system within your schools? Do you have a standard for interaction? Do you continually reassess staff development needs? Is there a means for gathering consumer feedback on a frequent basis to facilitate proactive problem solving? Do you have those mechanisms in place? When developing the change plan, these are just some -- not all -- of the components that must be in place.

We are in the process of working with a school district of 50,000 students and with two school districts that are moving to a totally integrated program. All these school districts are currently running large segregated educational programs, preschool through secondary programs, and the first thing we're developing is a change plan. We are not simply relocating classrooms. We are developing a change plan that involves parents, teachers, administrators. Here are some of the things that we are including within that change plan. The elements just happen to be consistent with the racial desegregation literature. They include procedures for all faculty distribution, training, supervision, ongoing support systems, and student, parent and community information and training. Again, the information and training is on behavior change, not attitude change.

Figure 5.

DEVELOPING THE CHANGE PLAN
PLAN SHOULD INCLUDE, BUT NOT BE LIMITED TO:

1. Procedures for all faculty distribution, training, supervision, and ongoing support systems.
2. Student, parent, and community information and training.
3. Role clarification for special education director and regular school principals.
4. Transportation arrangements.
5. Provision of related services.
6. Development of a system for maintaining coordination of curriculum and procedures.
7. Use of empty facility if closing a special school
8. Specific timelines and assignment of responsibilities for implementing the change plan and ongoing provision of integrated services.

The elements also include role clarification for the special education director and the regular school principals. That's going to be very, very important. What kind of a role? I know you've talked about that in the last couple of days, too. Do you have good role definitions and clarifications for reaching the people in terms of what their responsibilities are?

You must also look at transportation arrangements. Do you know that special education does exactly the opposite of what is considered social policy in this country? We bus to segregate. That's contrary to social policy, isn't it? Somebody, someday is going to recognize that - - I hope very soon. The fact is, with all the busing going on in this country and the means to achieve integration through busing, we bus to segregate. So, when you look at transportation, you ought to start with that premise, and try to look again at the neighborhood school cutting down the transportation as much as possible.

One of the things that we're looking at is heterogeneous grouping. Homogeneous grouping in the neighborhood school approach is not going to work. There is no evidence in the literature that homogeneous grouping is any more effective, anyway. We are trying to deal with what the federal government set up in terms of dealing with categorical labels, breaking down those labels, placing students first and foremost in the neighborhood school, then looking at how heterogeneous we can be to provide effective instruction. Under the system that I described this morning, the teacher is not so exclusively a provider of direct service; he or she provides very little direct service, and becomes much more of a manager of resources: peer tutors, volunteers, and other nonhandicapped support systems.

We've got to look at related services and development of a system for maintaining coordination of curriculum. You're going to have to look at your empty facility. One of the first roadblocks to any discussion is, "We don't have a plan for our special school. What are we going to do with it?" That could be a very big problem. In Utah, we have nine school districts involved in major segregation. Three of those school districts have built million dollar facilities within the last two years. We have probably one of the finest handicapped swimming pools in the country. It's a wonderful pool. Utilization is a little low, but it cost this school district a million dollars to build this swimming pool in a segregated facility. What are you going to do in that situation? How are you going to plan for it? Fortunately, there are some successful examples of what you do do to plan for that.

I think some of the newer buildings will be transferred into elementary schools or secondary schools. One of the things that we will not support is the side-by-side approach where you start to phase out the special school by bringing in nonhandicapped students so that you have 90% of the school handicapped, and 10% is nonhandicapped that you're trying to phase in. We don't believe that will be effective at all; the literature indicates that it is contrary to what we want to do. So, first of all, we're going to have to redistribute all of these students across the school district, and we are going to have to plan for the facility. We would be very naive if we didn't do it. We are dealing with three facilities in the next two years. What are we going to do with them?

Quite interestingly, once you start with the idea that you're going to do something, it happens. Once you say you're going to have to do something, then the discussion is not around whether you're going to do something, but what it is that you are going to do with the facility.

Finally, you need to include specific timelines and assignments of responsibilities for implementing the change plan and for the ongoing provision of integrated services.

I want to review quickly what the desegregation literature says about major leadership roles. The racial desegregation literature has clearly described effective and noneffective leadership. Leadership, of course, starts with the school board and superintendent (see Figure 6).

Figure 6.

MAJOR LEADERSHIP ROLES IN MANDATED EDUCATIONAL
CHANGE: DESEGREGATION OF SPECIAL SCHOOLS FOR
HANDICAPPED STUDENTS

Type of Leader (s)	Effective Leadership in Situation	Ineffective Leadership in Situation
School Board and Superintendent	Take strong stance for inevitability, desirability of change. Concentrate on initiating effective change plan, regardless of personal	Ignore issue and hope district will not be be challenged. Make internal dissension public and vie for support. Assume neutral position, followed by weak or no effort to implement change. Actively resist change. Use delaying tactics.

Effective leadership for change means taking a very strong stance for inevitability, and concentrating on initiating the change plan, not on debating the issue. Ineffective leadership is exemplified by an administration that ignores the issue and hopes that the district will never be challenged. Ineffective leadershipalso makes internal dissension public and vies for support. We have two school board members who have made their dissension public. They've "gone public," that they will not tolerate this discussion of moving to a segregated educational facility. There is an interesting correlation here: These two school board members led the fight for the handicapped swimming pool and convinced the board to pay the million dollars for that pool. It is a very, very difficult situation for a board member that has invested district money in a facility and is now faced with the fact that it is inadequate. What we're trying to do with those people is try to save face for them by talking with them about what the alternatives might be so they can come up with an idea that will be theirs for the use of this facility. The only way we're going to get to that school board is when the idea comes from them. We will not bring about change in that district until those two school board members are convinced that they're going to save face.

Effective leaders do not assume a neutral position. the racial desegregation literature says it is just as bad to be neutral as it is to be negative. You've got to come out strongly in support of the idea because a neutral position essentially means nonsupport. It is viewed and perceived as nonsupport. Finally, the school board and superintendent can provide ineffective leadership through actively resisting change or use of delaying tactics.

In looking at the special education director, many of the leadership issues are essentially the same (see Figure 7). It is important to take a strong stand for theinevitability of change. In many, if not most districts, the special education director in particular is going to have to be the "idea champion." He or she is going to have to be strongly out front with ideas about how integration will occur and take a very active role in developing the change plan with the central administration.

The ineffective special education directors will be those who play both sides of the issue depending on who they are talking to. We do have a special education director like that. He plays both sides very effectively. If he's talking to us and he's talking to people involved in integration, "I'm all for it. Great, let's do it. Let's expand those models. It's wonderful." He goes back to the special school principal and says, "All is well. I would never let this school be touched. There's no way. This is a wonderful place." So what he does is create a very clear indication that change won't take place. Now if you really want to stop change as a special education director, that's a pretty good way to do it. Play both sides; everybody thinks everything else is fine and nothing moves.

Parents get both sides of the issue, too. You talk to one parent, it's, "All's well in special school." Talk to another parent, "Oh, we're expanding the integrated programs. Your son or daughter can move into integrated programs." In this particular case, what we find is that every time a parent requests an integrated program in this district, the district will comply. So, they say they're meeting the needs of all parents, they're meeting the needs of everybody. They can continue to run their special school while they expand their integrated programs. Of course, if you consider the amount of money and the support systems in the special school and within the regular education buildings, it is clear that the parallel system is going to be impossible within a short time. Resources in that district will not be able to support two parallel systems -- one integrated, one not. It's no different than it is in the community at large. We know we cannot support parallel systems, institutions and community programs. We simply cannot effectively support them; unfortunately, what suffers is the community programs.

Figure 7.

Type of Leader (s)	Effective Leadership in Situation	Ineffective Leadership in Situation
Special Education Director	Take strong stance for inevitability, desirability of change If necessary, educate board and superintendent on basis for change, anticipated educational, social and financial benefits. Provide expertise on integrated service delivery models, either through identification of outside experts. Be actively involved in the development of the change plan. Provide education regarding integration and support to special school staff, parents and regular education principals. Be an idea champion.	Play both sides of the issue depending on immediate audience. Fail to provide necessary expertise. Fail to provide necessary ongoing personal support. Fail to provide necessary structure for change process, new service delivery system. Become defensive or withdrawn in reaction to concerned or angry parents, special educators or regular educators.

Other ways to slow down the process of change include failing to provide necessary expertise, failing to provide necessary on-going support, failing to provide a necessary structure for change process, and, above all means, becoming defensive or withdrawn in reaction to concerned parents. To slow change down very, very fast, simply become defensive or withdrawn.

What about the role of regular education principals (see Figure 8)? Again the racial desegregation literature tells us that to be effective, principals should demonstrate the same support and commitment to special education as to regular educators and nonhandicapped students. Take the special out of special education. Take it out. Incorporate those students right back into the heart of the school. At all costs, avoid saying over the microphone, "I think that EMRs need to get on the bus now." Those things that can create immediate differences. It may be unintentional, but this kind of thing immediately sets the group off from others. In the newsletter that goes out from the school, you have the stories about all the nonhandicapped programs where they talk about the kids. They don't identify the kids and label the nonhandicapped kids, but any articles that talk about special education say, "And, Johnny, who is in the EMR classroom...,". You immediately identify the kid as being different from the rest of the school. Look at subtle things like that to make sure you're not incorporating a separate system within your own school.

Figure 8.

Type of Leader (s)	Effective Leadership in Situation	Ineffective Leadership in Situation
Regular Education Principal	Demonstrate same support and commitment to special education staff that you do to those in regular education program. Actively seek information on effective provision of integrated services for severely handicapped students.	Assume that your role hasn't really changed because these students are too handicapped to have anything other than peripheral involvement in regular education and are someone else's responsibility. Make opposition known. Show passive resistance, including visibily insincere support, withdrawal from special education staff and students. Assume that integration will happen automatically.

Desegregation literature also tells us that principals who are effective have actively sought information on effective service provision. They really want to know and they take the time to learn about it. Most of them will tell you, even our principals that we've worked with the last few years, that it's not an enormous burden by any stretch of the imagination. Basically, it is a small part of what they do. By and large, regular building principals have been very supportive. When we first started our high school and elementary projects, we were warned that regular education principals would be the first to block the changes, that they would not be interested. What we found was just the opposite.

Do you know the major concern of the regular education principals that we have worked with?: Too many special education kids. They wanted to know if we were going to make their school into a special education school. You know, we're good at that. One thing that special education does very well is that, when we find out there are good people out there in regular education -- supportive principals and good teachers, we dump on them. We give them all the handicapped kids. We assign all students with disabilities to the same school because the principal is supportive. We also put all the handicapped kids in with the same regular education teacher if that teacher is supportive. We have to distribute. We're going to have to deal with principals who were originally not as supportive because we cannot overburden the system. If we cluster, we overburden or saturate the regular system. Most of the complaints against special education are complaints of overburdening the system. Currently, we don't distribute those kids throughout regular education; we cluster them with a few teachers and a few principals. Once we told the principal that our approach was to keep the numbers down, not to violate the law of "natural proportions," we had a whole different attitude. We have succeeded in every single one of those schools. However, if those same principals thought that they were going to get another 40 or 50 handicapped kids in the school, there would have been some significant problems! That's why the neighborhood school approach again makes more sense, because you try to distribute the handicapped students throughout the district.

The ineffective principal assumes that his or her role has not changed because these students are too handicapped to have anything other than peripheral involvement in regular education. Other ways to be ineffective in system change include making your opposition known, showing passive resistance (including visibly insincere support), and assuming that integration will happen automatically (...it will not).

Now here is one role I would like to talk about very quickly. The special school principal (see Figure 9). What are we going to do with the special school principal? What about this person who is about to lose his or her job? Well, we're going to become very straight forward with this one. Special school principals who can be effective will emphasize the areas of continuity in change to their staff and to the parents in spite of change. They will talk about the fact that there will be continuity. They will be supportive. They will communicate the concerns of the staff and parents to the special education director regarding joint problem solving. They become a liaison with the central administration. They can work very effectively with parents who are concerned about the switch to integrated programs. Often, the most effective special school principals serve as idea champions. They buy into integration, and say, "I'm supportive. I understand the ideological basis for this, and I understand the empirical basis for this." And they are flexible in considering their own new role possibilities.

One of the biggest problems with the special school principals that we have been working with is that they have been so isolated in special education that their chances of moving back into the central administration are very remote. The central administration does not recognize them as an administrator which creates some very significant problems for these people. If you are a special school principal who is unable to participate positively due to strong personal opposition, we ask you to start looking for a new appointment. Very straight forward about it. Please get out of the way.

Figure 9.

Type of Leader (s)	Effective Leadership in Situation	Ineffective Leadership in Situation
Special School Principal	Emphasize areas of continuity to staff and parents in spite of change. Communicate staff and parent concerns to special education director of joint problem solving. Consider serving as idea champion. Be flexible in considering new role possiblities. If unable to participate positively due to strong personal opposition, begin looking for new employment opportunities. In cooperation with regular education staff plan for sustained, positive interactions (structured & unstructured) between handicapped and non-handicapped students.	Make parents, staff choose sides. Assume personal disloyalty if they support integregated services. Make opposition known. Actively resist change every step of the way. Show passive resistance, including visibly insincere support.

If, as a special school principal, you want to be ineffective, you can make parents and staff choose sides and assume personal disloyalty from your staff if they support integrated services. One way to do this is to make sure you tell the staff that, "Well, you are personally disloyal to me for saying that these kids should be in an integrated program." That will make sure that it doesn't happen. You can also make your opposition known and display passive resistance, including visibly insincere support.

The effective special education teacher (see Figure 10) emphasizes capabilities of students rather than deficits. Special education teachers have to realize that they are in a new role with completely new role responsibilities. Part

Figure 10.

Type of Leader (s)	Effective Leadership in Situation	Ineffective Leadership in Situation
Special Education Teacher	Emphasize capabilities of students rather than deficits. Emphasize similarities rather than differences. Provide accurate, sensitive information about student abilities and needs, how regular educators and students can most effectively interact with them. Integrate yourself as staff member. Become part of new (regular) school, including assuming share of responsibities. In cooperation with regular education staff plan for sustained, positive interactions (structured & unstructured) between handicapped and non-handicapped students.	Emphasize how different your students are, how different your role is. Assume that integration will take place automatically. Show lack of sensitivity to concerns of regular educators about additions to their responsibilities and any feelings of uncomfortableness with your students. Isolate yourself and students within school. Associate exclusively with other special educators and classroom aides.

of the difficulty with special education teachers now is the way that they were trained in the first place. Universities are responsible for that. Universities have been very, very negligent in their approach to personnel preparation. The blame should not be placed on the teacher because he or she is only doing what they were trained in the first place.

For special education teachers to be effective, though, they are going to have to accept some retraining. They must accept a different role responsibility and a different interaction process with the new school. Their support system will change. The state and the school districts are going to have to provide an effective support structure and professional training. I will be very straight forward on that because it is another one of the biggest arguments districts will give youagainst movement. They will say, "We haven't got the teachers. We haven't got the teachers who can effectively work in integrated programs." They are right. Universities have not adequately prepared those people so there is going to have to be a restructuring in personnel preparation statewide.

We are restructuring all of our personnel preparation standards in the state of Utah. All of them. One of the things that is now clearly written in every teacher certification program in the state is the standard that says they will have competent teachers to work in integrated settings: They will develop and implement programs in integrated settings.

However, it is clear that if we do not train teachers for integrated settings, they will not be effective in integrated settings.

Let me talk a bit about the regular education teacher; again, I won't go through all these because of time constraints (see Figure 11). The effective regular education teacher will actively welcome the special education staff and students to thebuilding and view the special education teacher and staff as a part of the regular education building. This means not viewing them as separate from them.

If we don't look at effective change, then we will, of course, get back to my friend Garfield, who ponders: "You know maybe there's more to life than just eating and sleeping. Maybe I should be more considerate of other peoples' feelings. I should be nicer to Odie and I should be more generous." Then, of course, after he thinks about it for a minute the response is, "Nah."

Thank you all very much.

Figure 11.

Type of Leader (s)	Effective Leadership in Situation	Ineffective Leadership in Situation
Regular Education Teacher	Actively welcome special education staff and students to building. Think of ways to involve in ongoing social and educational aspects of school life. Make suggestions. Work for curriculum adjustments that will include knowledge of handicapping conditions and implications on lifestyle, preventation, special education and use of prosthetics, corrective surgery, acceptance and appreciation of social diversity. Be supportive of special education teachers' efforts to increase interaction and knowledge of other regular educators, parents and students.	Withdraw from special education staff and students and hope no one will ask you to do anything with them. Make opposition known. Show passive resistance, including visibly insincere support. Assume this doesn't concern you. Your current attitudes and knowledge are sufficient because you won't really be involved.

DEVELOPING BUILDING SUPPORT AMONG ADMINISTRATORS AND STUDENT BODY

Summary by Richard Long

JERRY WAGNER (Moderator), Director of Special Education, Washington Township, Indianapolis, IN

DON KING, Principal, Northwest High School, Indianapolis, IN

WALT VANDERBUSH, Principal, Franklin Community High School, Franklin, IN

The purpose of this session was to discuss ways to build support from students, teachers, administrators, and parents for the education of students with substantial handicaps in the regular public school setting. The panel included administrators from two school districts involved in the Indiana Least Restrictive Environment (IN-LRE) Project: Don King, principal of Northwest High School in Indianapolis, Walt Vanderbush, principal of Franklin Community High School in Franklin.

Vanderbush began by giving information about the Franklin community. Franklin High School has an enrollment of 1035 students and is location in a small town whose population is 12,000. Many students live in the outlying rural area. The LRE program has 14 students and two teachers, all of whom moved from a special school that served students of all ages.

About 18 months ago, Vanderbush was contacted about starting a classroom in his building for students with severe handicaps. He recognized his ignorance about LRE and visited a program for youths with developmental disabilities before making the decision to start the class at Franklin High School. Students at the high school were also ignorant about persons with severe handicaps, Mr. Vanderbush thought, and would benefit from interaction with them. The superintendent supported introduction of an LRE class, and the high school Cabinet, a group of department chairpersons and other administrators, was informed of the planned addition.

Parents of the students with severe handicaps who would be attending Franklin High School and the students themselves were taken on a tour of the facility prior to the beginning of the semester. Teachers were told of the new class during a faculty meeting, and students were urged to provide a friendly welcome. Immediately, students began to request that they be allowed to work as aides for the new class.

Decisions made before the start of the LRE class included what room the students would use, and whether or not to admit one student who had a history of aggressive behavior and biting. After careful consideration, Vanderbush selected a room on the first floor. The room was just across from two math teachers, one who teaches lower level math and another who teaches the highest level math. This would provide the LRE class close proximity to a variety of students. Plans were made to enroll the student with the history of biting after the new class was somewhat established. Vanderbush felt that if a biting incident occurred early in the semester, the program would be more tarnished by the incident than if it occurred when the program had been in place for a time.

The LRE class has been well accepted and the students are considered part of the Franklin High School student body. They eat lunch with the other students, attend assemblies, have been integrated into art and physical education classes, and follow the regular bell schedule. They participate in extra-curricular activities and have their pictures in the yearbook.

Special home economics and industrial technology classes are offered for the LRE students. Both instructors have expressed a desire to continue these classes, describing them as deeply rewarding experiences. Though some teachers had initial reservations about the program, Vanderbush reported that, after one year of the LRE program, not one is opposed to continuation of the program.

A peer tutor club was developed and now has more students interested than there are tutor positions available. To further assist integration, regular subject matter teachers are trading classes with the LRE instructors to provide new learning experiences for all students -- and staff! For example, a biology instructor taught science to the students of the LRE program while the LRE instructor lectured the biology class on special education. This exchange greatly increased interest in the peer tutor program. One of the two LRE teachers offered a two week summer course entitled, "Breaking the Barriers," supported by a grant for creative summer coursework. Her class was one of the first filled out of a large number of course offerings.

Opportunity for vocational training has been available in two main areas. Some of the students have worked at the school in custodial positions. Others have been assisting in the library. Much success has been seen in both areas.

There have been relatively few problems with the LRE program. Two minor incidents of nonhandicapped students making inappropriate remarks were reported and dealt with accordingly. Custodial staff complained about the disposal of diapers. The student with the history of biting had to be placed on homebound instruction for a time. Overall, however, Vanderbush felt that the first year of the class went very well.

There was one conflict surrounding graduation. Vanderbush felt that those LRE students who would be leaving the system should receive a regular high school diploma. His decision did not agree with the policy of the segregated school which is to give a "certificate of completion." The director of special education feared that parents whose son or daughter received a certificate of completion would complain if other students with severe handicaps were given a regular diploma. The director also questioned whether or not the students could be reported as meeting the state's requirements for graduation. The compromise was to give students of the LRE program a certificate of completion in a regular diploma folder. Parents were told of the difference prior to graduation. Vanderbush concluded by saying that plans for next year include increasing LRE activities. The LRE class has received much support and Franklin High School is looking forward to future work with the LRE program.

Don King is the principal at one of seven Indianapolis high schools. The students at Northwest High School come from an area of the the city that is 60% black and 40% white. The white community is below the average white population of Indianapolis in socio-economic status and level of education while the black community is above the average black population of the city in these measures. Approximately 1500 students attend Northwest High School.

For many years in Indianapolis, students with severe handicaps were segregated in a special facility. Two years ago, King was approached about starting the Indianapolis LRE project in his building. He stated that because of his lack of knowledge about problems that could occur, he felt he actually experienced fewer problems.

King feels that the greatest benefit in having an LRE classroom may be to the regular student. This prevents "Shopping Center Shock," that startle response that occurs when a student sees a person with a severe handicap for the first time in a shopping center. The shock also occurs when that student becomes a married adult who has an infant with a handicap.

One fear of some school officials was that the LRE students would "look different" than the regular high school students. King suggested that those officials observe what the so-called regular students actually look like: Appearance is not a major problem. Other early questions included how to get the students with severe handicaps to the cafeteria and whether the tables would be too high, whether the students could even get into the building, and where the class could be located to be the least disruptive. Staff developed very elaborate plans to assist the LRE students into the building and to their classroom the first day of the program. When the bus unloaded at the wrong door and 14 students with substantial handicaps found their way to their classroom without assistance, King knew that previous worries had been overstated.

The peer tutor program has been one of the best ways to build support for LRE among the student body. A cheerleader and a well known football player were peer tutors during the first year of the LRE program; their involvement helped to promote acceptance of the program among other students. Any type of program where regular students regularly interact with the students with severe handicaps will develop building support. A complementary way to increase building support is to have students with handicaps participate in extra-curricular activities. These activities help the student feel like a part of the school.

Behavior problems are not insurmountable. One student with a severe handicap slapped a peer tutor; reflexively, the tutor slapped back. This eliminated the behavior immediately. Another student who occasionally acts inappropriately will stop the unacceptable behavior when given a stern lecture by the principal, just like most other students.

Students from the LRE program can successfully participate in many regular classes. Some of the students in the LRE program may participate in regular athletic programs. Though they may be physically able to participate, the question of their academic eligibility has not been resolved.

A principal should welcome parent concerns about the LRE program. The alternative -- parental apathy -- is much harder to address. If parents need evidence that integration is worthwhile, show video tapes made of the students when they first enter the program and again one year later. The advances in social interaction and other skills will be obvious. Emphasize to parents that if they want their son or daughter to make a successful transition from student to working member of the community, LRE is the best way to proceed.

Graduation has been a problem at Northwest also. Objections to participation in graduation were raised the first year and a special reception was held with an age-appropriate graduation for the two graduating students. This year, the graduating students from the LRE program will attend regular graduation, complete with caps and gowns. They will be given a certificate of completion.

Jerry Wagner closed the session with a warning: Don't worry too much. It is easy to talk yourself into problems that would not otherwise develop. He also identified areas in need of clarification:

1. State academic requirements for graduation and athletic eligibility.
2. Credit for peer tutor experiences.
3. Liability questions regarding transportation of students into the community by LRE instructors.
4. Continuation of services, particularly supported employment services, after graduation.

PREPARING TEACHERS AND RELATED SERVICE STAFF FOR INTEGRATION

Summary by Marilyn Irwin

DIANE RYNDAK (Moderator), Indiana University Institute for the Study of Developmental Disabilities

JENNIFER CAMPBELL, Program Specialist, Paradise Valley School District, Paradise Valley, AZ

NANCY FRESSLE, Occupational Therapist, Littleton School District, Littleton, CO

KATHY HURDISH, Teacher, Morton High School, Hammond, IN

EDI OTTERSON, Teacher, Franklin Community High School, Franklin, IN

The purpose of this session was to present role changes required of teachers and related services staff members to implement integrated and community-based programming, and to discuss how professionals should prepare for those changes. All of the presenters were employed in schools which were involved with the National LRE Network.

Nancy Fressle spoke of her role as an occupational therapist on a special education team, and specifically about how an occupational therapist fits into a functional, community-based program. Fressle works at two sites with young adults between the ages of 14 and 21 who are served in heterogeneous groups. With these groups, she not only provides assessment and therapy, but also assists in the development of adaptive equipment when it is necessary. All of her work has the goal of enabling students to have the functional skills needed to be as independent as possible.

In developing therapy plans for students, Fressle feels it is important to ask why the therapy is provided -- to improve or maintain the skills of the student. If the therapy is to improve skills, direct therapy may be warranted. If, however, the therapy is to maintain skills, the therapist should begin to consider where the individual will receive therapy after graduation and how that program will be carried out.

To illustrate the difference between therapy to improve and to maintain skills, Fressle discussed her work with David, a student approaching the age of 21 who has multiple physical handicaps. With the permission of his mother, David was taken off therapy for a month to determine the effect. During that month, the team reported that David complained of being tired, had lost a lot of his fine motor ability, and had difficulty driving his electric wheelchair which effected his independence. It was determined that David needed maintenance therapy which would continue after he left school. Because the family's insurance would not cover the continued therapy, the role of the therapist became one of training the mother to provide relevant therapy.

Another role change involves the transition from clinically-based to functional, community-based therapy. Several examples were given. Fressle's goals for Steve included building his upper body strength and maintaining his weight. In order to accomplish this, he was taught how to swim laps at the community college pool. Judy, another student, was taught to swim so she could go to the health club with her mother. She now enjoys swimming very much and has made a lot of her own friends at the club. Allison, whose therapy had included working on the scooter board and swinging on the therapy swing, now receives therapy at a fitness center with her mother. Each of the above examples illustrate the teaching of functional, age-appropriate skills, which can be maintained after school and which meet the therapy needs of each individual. When these students were tested to see if they had lost skills because of the transition away from the traditional therapy, there was no loss. Fressle stated that she no longer uses the traditional clinical therapy equipment.

Fressle listed four items that contributed to the ease of her transition to a community-based therapy program: (1) her training, (2) the commitment of her school to a team approach -- she and the teacher were trained together so that they could tackle a problem from the same frame of reference, (3) the support she received from her state LRE representative, and (4) the support she received from the local administration. Fressle recommended that more therapists and other related services staff be included in training and conferences on least restrictive environment to facilitate a common philosophy and that programs provide time for team planning, goal and priority setting, and monitoring responsibilities.

Fressle concluded by saying that the community-based, functional approach to therapy is not only a benefit the students, it is also rewarding for the teacher and therapist.

Kathy Hurdish, formerly a teacher in a segregated facility and a proclaimed "novice" of the integrated approach to teaching students who are labeled moderately handicapped, has found the new methods very exciting. In the first year, key elements for effective change became very apparent. The most important of these was an understanding and a common commitment to one goal for the students being served. One means to develop that focus or commitment is to involve members of the team in conferences and inservice training. A second way to have a common understanding is to have clear expectations set by program administrators. Clearly defined role descriptions for teachers, aides, and related service providers facilitate understanding and decision making. Open channels of communication between teachers, related service providers, parents, administrators, and school board members will allow the change to happen systemwide.

Some of the problems faced at Morton High School included building accessibility, access and transportation to community sites, concerns for liability, and policies for utilizing local instructional sites for those students who were bussed out of their home school area. In addition to learning how to write IEPs to match a community-based model, the staff also had to determine new methods to establish accountability. Hurdish also felt the staff got itself in a bind by not building in time to discuss what was happening, including input from aides and administrators, to make modifications as the need arose. To introduce parents to this new method and include them in ongoing information sharing and problems solving, the staff had to provide inservice training and ongoing contact. The most difficult problem proved to be developing a classroom schedule.

Hurdish ended by stressing that these problems can not be solved overnight -- they take time and commitment on the part of all staff members involved.

In the last year, Edi Otterson moved a classroom from a special school to an integrated community high school in Franklin, Indiana. In the shift, Otterson said she also moved from being a special education teacher to an integrated teacher. She has enjoyed the change and found it refreshing to be a part of a faculty that has interests other than special education.

Otterson reports that she had to change and learn right along with her students -- following new rules and bell systems, getting through the hallways with all those very tall high school students, and so on. Her first role in the high school was that of a public relations person and advocate for her students. She spent a lot of time talking with regular education teachers and students about the positive things her students could do. After her students made their own friends, they were able to do their own PR and she was able to spend more time as a teacher.

The skills she could transfer to the new role included knowledge of the components of a good program, organizational skills, a vision of what she wanted to see in the integrated program, and, most importantly, a commitment to the program in order to follow through with what needed to be done and to project a positive attitude to the parents, administrators, and the rest of the school.

One of the exciting benefits of the regular campus has been the involvement of peer tutors. They have been more than tutors; they have become friends. Friends who take students home for the evening or to a ball game. These friendships are something that happened quite naturally. Otterson found it much easier to start a peer tutor program than she expected.

One thing she missed initially was the camaraderie with other special education teachers. In the new setting, however, she had a supportive principal and built a new support system and new friendships with other teachers. Other problems involved her training and some of the things she had to learn. One of the things she had to learn was how to let go, how to give her students responsibilities and allow them to be regular high school students. Otterson also admitted that she had not been educated in the functional approach; her special education instruction had been in academic teaching. In the segregated environment, she had never catheterized a student or given medications because the school nurse was always available for those tasks. She also lacked experience managing the behavior of students in the community. Most of these "deficits" have been remedied through team training, support, and problem solving. As in all of teaching, Otterson felt there were always areas that she knew she could work on harder or learn more about.

Overall, Otterson's first year was very positive. In a recent update, she received positive feedback from those regular education teachers with whom her students have been mainstreamed -- reinforcement from her peers that what she was doing was right.

Four years ago, Jennifer Campbell took a job in a school system where she and the system were committed to building a new segregated facility -- until she heard Wayne Sailor and Lou Brown at a conference and became a "born again integrationist". In the 1987-88 school year, all students will be moved into integrated, age-appropriate school campuses; those students with even the most severe handicapping conditions will be in the community and in job sites; and all segregated facilities will be closed. Campbell felt it was important to share how that was done.

One important element was a commitment and support from administrators, including support from the school board. If one person wanted to get the ball rolling, Campbell suggested examining the literature and providing a report that discusses how the current system is failing in terms of the cost of education relative to the end result; administrators would love to hear how it could be better for their kids.

Having someone available for technical assistance and to talk to was also important. Two technical assistance projects were involved in Paradise Valley to provide assistance to teachers, administrators, and related service staff every month to six weeks. Ongoing inservice training has complemented the technical assistance. The staff meets monthly for training which was provided by anyone of a number of experts. There were also several conferences held in Arizona on the least restrictive environment initiative. One of the advantages of this ongoing technical assistance and training is that everyone begins to believe and say the same thing.

Although they were not able to do this, Campbell recommended that administrators, parents, and teachers visit integrated sites which are currently involved in community-based training. She was delighted to be able to say that Paradise Valley now serves as a model site where others can visit and learn.

One of the ways a supervisor can ensure facilitation of community- based programming is to design job descriptions and evaluation mechanisms to accomplish this goal. A part of that is to be sure that staff members are all committed to the same goal and are respectful advocates for children. If there are disbelievers, they need to be told "This is the way it is; there isn't another option."

Campbell concluded by saying that there have been problems and there would continue to be problems, but the satisfaction makes it all worthwhile. They have realized that students are finally being trained appropriately to allow them to be as independent as possible, and teachers, through that realization, have experienced less burnout.

As a teacher trainer and provider of technical assistance, Diane Ryndak identified four areas that consistently cause problems. The first is the perception that a teacher must follow a set curriculum based on the results of established assessment tools. Ryndak suggested that what was right for one student is not always right for another because they do not live in the same place, recreate in the same areas, will not be in the same job, and so on. It is important for teachers to use their own judgment in looking at each student, designing an IEP that will allow him or her to be as independent as possible, and teaching to that IEP.

Related to that is the concern for meeting the individual needs of a student when a school does commit to teaching functional skills. Ryndak noted that when she visited sites, she often found teachers who were teaching nice, functional skills, but they were inappropriate to the needs of the student. Just because an activity is functional, it does not mean it is meaningful for each student. When teaching a task, teachers should ask what each student was doing and why it was important for that particular student. If the questions can be answered based on the needs of the student, then it is a good, meaningful and purposeful activity.

A third challenge involves teaching styles. If the purpose of instruction is to increase independence, teachers must examine their role to determine how they can teach independence rather than maintaining their role of instructing. A prime example of that is with direct rather than indirect cues, telling students what to do instead of teaching them how to make decisions.

A final problem for teachers, administrators, related service providers, and parents is to admit that they do not have all the answers. Students with severe handicaps are challenging and unique. Often, there are no easy answers to problems. As soon as that is admitted, cooperation and problem solving become the obvious alternative.

BUILDING OPPORTUNITIES FOR AFTER-SCHOOL AND OUT-OF-SCHOOL INTEGRATION

Summary by Vicki Pappas

ROBI KRONBERG (Moderator), Site Coordinator,
National LRE Network (CO)

TIPTON RAY, Department of Leisure Studies,
University of Minnesota

BILLIE WILSON, Coordinator of Therapeutics,
Department of Recreation, Silver Springs, MD

The purpose of this session was to explore more ways to maximize interaction between people labeled as having disabilities and those not so labeled. If people are to become socially valued members of their community, they need to get "socially-connected" there. Panelists shared their thinking and experiences in creating opportunities for and facilitating that "connected-ness." They focused their attention on leisure and recreational programming.

Tipton Ray, a doctoral candidate in leisure studies at the University of Minnesota and a recreation therapist who recently coordinated a project to integrate municipal park and recreation system in Minnesota, started the session. He presented a rationale for leisure programming in community-based environments, assuming that the audience understood the need for leisure and recreation in the lives all people. Support for such an approach fell into five concepts: legislative mandate, philosophical foundations, practical implementation strategies, multiple benefits, and quality of life.

Ray reviewed the strong thread of legislative mandates that support community-based leisure programming, including the Architectural Barriers Acts of 1968 (which provides for physical access), Section 504 of the 1973 Rehabilitation Act (which provides programmatic access), and P.L. 94-142 (which identified recreation and leisure education as a "related service"). These significant pieces of legislation, as well as some currently being proposed, establish the legal and moral foundation for persons with disabilities to access community programs and settings funded by public moneys, including leisure services. As a result, municipal, state, and federal parks and recreation areas, as well as community education classrooms and public school systems, are subject to those legal mandates to provide individuals with disabilities the same types of leisure and recreation opportunities as their nondisabled peers, and within integrated settings. Because of these laws and the diligence of people seeing that they are implemented, we now see more people with disabilities living, learning, and recreating in the community. Consequently, community agencies, especially leisure service agencies, are beginning to think about and assume the responsibility for making their programs both integrated and accessible.

Normalization and LRE form the philosophical foundation which supports community-based leisure programming. These concepts focus on the rights of persons with handicaps to have the conditions of their lives determined by their citizenship, and not by their handicapping condition. Normalization is the guiding principle for service delivery. It considers the unique qualities of persons, their inherent skills and abilities, and the special considerations that may be needed as a result of those unique qualities. It further recognizes that learning to take a place in society requires active participation in that society. As far as recreation has been concerned, specialized recreational services were most generally developed for people with handicaps. Now recreation programmers are looking at the inherent appeal of recreation and the need for recreation, and are looking at ways to give all participants, regardless of the variability in their abilities and past experiences, the opportunity to take what they will from their leisure involvement. Other guiding principles, such as the criterion of ultimate functioning, the principle of partial participation, chronological age-appropriateness, also enter into the development of a philosophy of service.

A third area deals with practical strategies. Even though social policies have brought more people with disabilities into the community and even though normalization guides our thinking, there is still questioning about the most effective ways to operationalize these principles. We recognize normalization as a process as well as a goal, and that integration must be accomplished in a systematic approach so that the individual and societal benefits will indeed accrue. While chief responsibility for training on a one-to-one level falls to educators, parents, caregivers, related service, and volunteers, community leisure service agencies have primary responsibility for assuring that services are open and accessible because their reason for being is to provide diverse opportunities for leisure experiences to the citizens of the community.

They need not accomplish this alone. The team approach is just as applicable in planning community recreation activities as in educational programming. The community recreator needs the support and assistance of a variety of key people because he or she is not generally trained to address the specific needs of specific population groups. In addition, other leisure service providers, such as voluntary agencies (the "Y", scouts), as well as commercial leisure agencies that may provide facilities or equipment, all need to come together as part of this "team" to discuss how to accomplish integration. The team approach will be essential in overcoming barriers.

Communication among key people is only a first step. Other strategies are currently being developed and validated across the country, and include: awareness of the leisure environment; a focus on changing systems rather than individuals; leisure services staff training; networking; architectural accessibility surveys; environmental and ecological analyses of leisure settings to individualize participation; incorporation of behavioral methods such as task analysis and positive social reinforcement from trainers as well as peers; designing programs which focus on cooperative goal structuring or grouping arrangements rather than competitive team models; increased cooperation; and use of volunteers/advocates.

The audience was asked for examples of the multiple benefits rationale. After eliciting a list of many reasons why people recreate, Ray pointed out that people with disabilities do so for the same personal reasons. He also noted there are also externally-imposed reasons for recreation, which are reflected as IEP and IHP goals for persons with disabilities, for instance, "to develop an independent leisure lifestyle," "to develop choice," "to reduce inappropriate social behaviors," or "to increase attention span."

There are also societal benefits which accrue when people with handicapping conditions become involved with recreation, and these relate predominantly to attitude: reduction of stigma, increasing acceptance, learning about and tolerating differences, peer acceptance and appreciation, development of interpersonal skills and relationships, and the like. Recreation and park areas and facilities become more socially and physically integrated, and more accessible as a result of involvement.

Benefits of leisure involvement for people with disabilities is more than just skill training and filling in free time. It also provides them introduction to variety, opportunities to socialize, and just as importantly, affirms the values of leisure.

Finally, the fifth rationale -- quality of life -- relates to where people live, who they associate with, how comfortable they are in their particular communities and neighborhoods, whether they have sufficient food and clothing, their employment, and extent of their family and spiritual community ties. Leisure is just another aspect of quality of life that is receiving increased attention. Some are even beginning to measure quality of life using leisure as an indicator. It is necessary to take an even closer look at what elements of leisure, if missing, might have a negative impact on a person's quality of life.

Ray believes that the true essence of leisure is "freedom" -- in essence, the freedom to make choices among diverse and available opportunities for unobligated times. For persons with disabilities, there are fewer opportunities to have and make choices about preferred activities and they have become dependent on others to determine when, what, where, and how they are to recreate, play, or socialize. When people cannot self-direct their own leisure lifestyles, they do not experience the freedom to choose preferred activities and do not experience true leisure.

Billie Wilson, as Coordinator of Therapeutic Recreation for the Montgomery County Department of Recreation in Maryland, developed a mainstreaming philosophy for the Department. She provided more specific information to the audience regarding Montgomery County's unique and innovative approach to service delivery.

For the program, they used the term "mainstreaming" rather than integration or LRE because it was a generic term most everyone understood, both inside and outside of education. She reviewed how her Department defined mainstreaming: all individuals with handicapping conditions are entitled to full participation in any Montgomery County Department of Recreation program, and accommodations shall be made to allow them to do so.

She then outlined the history of how this initiative evolved. It began in 1984 with outreach surveys to parents asking if they favored mainstreaming or special programs for their children. Responses were mixed and varied with age groups. Many parents were positive and others expressed fears. The department then conducted an attitudinal assessment of its own staff. This revealed major concerns in areas of cost, safety, architectural barriers, staff time, attitudes of the nondisabled participants, transportation, and program appropriateness.

Then Wilson developed a list of gaps in programs; for instance, camps for children with physical handicaps. She added "mainstreaming" at the bottom of the list. When the list was reviewed, parents and representatives of advocacy groups indicated that she had, in listing "mainstreaming", identified a direction that they really wanted and needed.

After those types of outreach efforts, they developed an ad hoc committee made up of a variety of people. This committee developed a set of work-oriented strategies to begin to advocate for such a program; for instance, to increase human and fiscal resources, to train Department staff, to develop a comprehensive outreach program, to provide for individual needs, and to foster community awareness.

An important part of the strategy was to collect on-going data for evaluation so that they could correct mistakes and grow. Then there was an effort to develop a policy statement to show support from the top. This Departmental policy became the foundation for communication and implementation, and provided a map for the development of the Mainstreaming Program. It included a definition, identified the population, and discussed the importance of recreation. It was based on assumptions that growth and adaptation are lifetime processes, and that citizens with disabilities should be treated with dignity and respect, not segregated from community participation.

Based on this policy, the Department committed itself to provide a range of options, to provide access to nonsegregated recreation, to encourage integration with nonhandicapped peers, and to provide a coordinating staff. Supports like interpreters, special equipment, companions, transportation, and financial assistance would also be provided.

When the plan was presented to the Budget Committee, it was funded not only with "soft," grant money, but also with county government funds. They began with $7000, and now are working with $90,000.

The major components of the Mainstreaming Program are considered the "meat behind their service". These include the concepts that mainstreaming is a process, that one must look for and create alternatives, that one must consider the individual rather than how a group can be served. Mainstreaming includes providing a choice, the opportunity of having an inventory of things that are possible to do. Mainstreaming also provides opportunity for individuals to increase their skills through structured program opportunities. Mainstreaming is developing community support and encouraging attitudinal change. Very importantly, mainstreaming follows the concept of natural proportions. National statistics show that 10-15% per cent of the population has disabilities; hence, the program should try to keep those normal percentages intact. Finally, mainstreaming means providing recreation for individuals with disabilities in the least restrictive environment.

Wilson also discussed what mainstreaming was not. It is not a wholesale return of people from special programs or therapeutic recreation programs into the mainstream. It can not happen overnight. It is not forcing individuals to integrate if they don't feel they can be successful. It is not "dumping" individuals into regular programs, simply signing them up without doing any of the prerequisite things that ought to be done like talking to the instructor or providing a little training or an accommodation. It is not eliminating segregated programs, for there are many people who want to continue their social contacts.

Another principle the Department is strongly tied to is the dignity of risk. Too often, professionals are over-zealous in trying to protect persons with disabilities. When these type of protective responses are taken to the extreme, what results is the stifling of the individual's growth potential and ultimately, the human dignity involved in taking everyday life risks.

Four major areas have been identified where persons with disabilities should be allowed to experience challenges: (1) to experience the normal risks of living in a community, (2) to experience normal risk in industry, (3) to experience normal risk in heterosexual relationships, and (4) to experience normal risk in building design. These include such program decisions as teaching how to manage machinery, hanging regular glass mirrors instead of metal ones, allowing for integrated residences and dormitories, and traveling about and finding one's way home during a community excursion.

The concept of dignity of risk has direct implications for therapeutic recreation professionals in the areas of facility design and program implementation. For example, there may be a movement away from sites which are over-protective. There already appears to be a shift from activities which are totally "safe" and of "guaranteed success" to programs of adventure, such as wilderness survival and high risk ventures.

One thing Montgomery County tried to do during their process of program development was to try to look at where people fit into mainstreaming. But not in terms of a "continuum" which implied lesser- to-better or unable-to-able, but in terms of something that had more fluidity to it, where people could go off in many directions depending on their unique needs at any specific times. What resulted were Challenge Levels, which allowed people to move back and forth and to be at different levels for different activities.

Challenge Level I, Independent Mainstreaming, considers the individual self-initiating and independent in the activity, perhaps needing only one-time support or a phone call. Challenge Level II, Complete Mainstreaming, provides for minor accommodations to integrate the person, such as financial assistance or transportation. Much of the staff work occurs in Level III, Partial Mainstreaming, where substantial accommodations are needed (equipment adaptations, assigning and training of companions, sensitivity training, braille materials, or transportation). Finally, there is Level IV, Foundational Mainstreaming, which provides "special" programs for persons with disabilities, but always with the principle of normalization as a guide to upgrade these programs. In Level IV programming, one might find the summer camp for the physically handicapped in the same building where the arts camp is, so there is potential for social integration. Additionally, age-appropriate and individualized programming exists, as does use of normal environments such as community pools and candlelight dinners in community restaurants.

One of the most important parts of the implementation process for the Mainstreaming Program was how persons with disabilities were brought into the program. The process which was developed was fairly simple, and was substantiated by many intake and evaluation forms. At first, there is a referral and a contact, sometimes from within the Department, often from a parent or an advocacy agency. That referral then leads to basic information-gathering about what the person's needs may be and what type of accommodations may be necessary to make the experience successful or whether a companion may be helpful. Training of companions and program staff may be needed, just as nondisabled participants may need to be sensitized.

After the individual begins the program, the staff continues to follow-up with other staff members and parents, and they provide encouragement to initiate contact if concerns arise. There is also an elaborate evaluation process, including weekly reports about how the participant is doing in the program, parent evaluations, and statistical logs. The Program encourages participants to begin the process over again with new activities.

In closing, Wilson cited "six steps to stagnation" that inhibit program growth and innovation, including comments like "we've never done it that way" or "we're not ready for that yet." That kind of attitude must be overcome if one is to move forward.

The bonus of providing mainstreaming must be on the system, not on the individual wanting to be mainstreamed. The concept of "separate but equal" must be seen for what it is: never equal. Although there is no single-solution approach to providing leisure activities in the community, it is important to get away from the typical bowling- swimming-arts-and-crafts approach of special program service providers. The goal is to meet individual needs, and to arrive at a truly programmatic approach where activities are by level of ability and open to all.

PLANNING FOR TRANSITION TO WORK AND COMMUNITY LIFE

Summary by Stine Levy

JOHN STERN (Moderator), Division of Developmental Disabilities, WA

SYLVIA PANZER, Arapahoe Community College, Littleton, CO

WENDY WOOD, Director of Employment Services,
Virginia Commonwealth University

This session focused on avenues for helping young adults with severe disabilities move from the school setting into the adult world. This topic was discussed from education, employment service, and state funding agency perspectives.

Sylvia Panzer is a teacher of students with severe disabilities in Littleton, Colorado. Her class includes 10 young adults, aged 18 to 21 years, who have a wide range of abilities. Because these students are post-high school age, instruction is provided on the local community college campus. This facility provides high school graduates with such diverse services as vocational training, adult education, physical fitness programs, a public library, and a public cafeteria. Panzer's classroom is centrally located in a high traffic area, thus maximizing exposure of her 10 students to other students. The room is available, however, only during the afternoon; the local community serves as the classroom for the rest of the day.

The goals of this three year post-high school program are three- fold: to establish a social network for the students with severe disabilities, to provide students with jobs in the community, and to initiate plans for living in the community. The program offers an excellent opportunity to look at the lifestyles of the participants after they leave public school and to explore what additional training and action is required to meet their long range needs as functioning adults.

Panzer has developed informal assessment procedures which examine students' present status in areas which includes: vocational placement, residential placement, income support, community leisure options, transportation, medical needs, needs for an advocate or guardian, long- term care (trust/will), maintenance of family relationships, insurance, and continuing education. The assessment includes a one page profile of how similar the students are to other persons their age. The program focuses on closing the gaps between the participants' present status and their assessed needs. It accomplishes this primarily by approximating, as closely as possible, the projected schedule of students' lives after school. One very important outcome of this process is a work history and resume for each student. Other speakers on the conference program noted earlier that a work history is a critical factor in the success of competitive community employment for citizens with severe disabilities.

Wendy Wood, the next speaker, articulated the following long-range goals for persons with severe disabilities: an opportunity to live and move in the community as freely and independently as possible, an opportunity to recreate and enjoy leisure in integrated community settings, and the best available community employment option which will lead to success.

Passage of P.L. 94-142 had the good effect of keeping children with severe handicaps at home in their own communities, rather than in large institutions. Unfortunately, as these young adults completed public education, there were few options available for them other than sitting at home or in sheltered workshops. Whereas approximately 75% of all persons with handicaps are unemployed, 86% of those with severe handicaps are without jobs. Only 12% of the trainees in sheltered workshops leave the protection of the workshop for employment in community settings. Wood proposed a three stage transition model to overcome the shortcomings of this service delivery system.

Stage 1 is designated as the input and foundation stage. During this phase, various community options in the areas of employment, residence, recreation, and transportation are identified and assessed. The end result of stage 1 is a menu of local options for persons with severe handicaps.

Stage 2 of the process consists of consumer input. During this stage, students and their parents or guardians develop individual transition plans which spell out the desired outcomes of the transition program and identify the appropriate means for achieving the designated goals. Representatives from the local public schools, the vocational rehabilitation agency, and the MR/DD center also participate in the preparation of individual transition plans. Each plan serves as a blueprint for inter-agency cooperation by designating which agency is responsible for each outcome specified in the individual transition plan, as well as for the specific steps and timeline for achieving these outcomes.

Stage 3, the final stage of the process, consists of an evaluation of employment outcomes. Each student is followed up two years after the transition program is terminated to see if they are still employed, and if so, where.

Wood concluded her presentation with slides showing persons with severe disabilities at work at such diverse tasks as placing clothes on hangers in a large department store, operating a dish washing machine, bagging groceries in a supermarket, sorting mail, sewing store labels on clothes in a dress shop, folding napkins in a cafeteria, and vacuuming a department store.

John Stern focused on the implications of residential policies advanced by state agencies for developmental disabilities. During the 1960's and 70's, states developed group homes as the model for providing residential services to persons with mild handicaps. This model relied heavily on the use of group home settings to train residents for more independent living outside of the group home. The training model, which prepared persons with handicaps for a less restrictive environment, did not work when applied to individuals who were more severely handicapped. For them, placement in a group home became permanent. Because persons with severe disabilities did not seem to "flow through," a different model was required. Instead of a training model, a support model was developed. This model assumes that persons with severe handicaps need to have the same experiences as other citizens their age. The support model describes the type of support that is needed for individuals with severe disabilities to function in normal settings. This means placing more people directly into apartments with varying degrees of support and supervision. This approach is flexible, and has the potential to provide living accommodations in less restrictive environments for many more persons than the group home model. It eliminates some of the hurdles with which developers of group homes are all too familiar, such as neighborhood property owner opposition, zoning restrictions, group home licensing restrictions, and building codes. Instead, all that is required is renting already existing apartments and providing only as much support as is required by each resident. Thus the focus of the support model is directly on client outcomes rather than on a training process.

Stern stressed the need for compiling data in order to evaluate the services provided to persons with handicaps. He indicated that there are currently no entitlement programs in the adult system, which means that programs do not have to provide services to all eligible persons, such as is required by P.L. 94-142. Other problems stem from the competition for the limited resources available to persons with handicaps. The federal mandate to deinstitutionalize clients resulted in large numbers of persons with severe handicaps being placed in nursing homes during the 1970's and early 80's. State funds are now being directed to placing these persons, rather than local citizens who are graduating from public school, in less restrictive environments. This is an example of how federal programs, based on outmoded guidelines, require states to operate programs which are not necessarily in the individual's best interests.

PREPARING STUDENTS WITH SEVERE INTELLECTUAL DISABILITIES TO LIVE, WORK AND PLAY IN INTEGRATED SETTINGS

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Today, I would like to do three things. Very briefly, I'd like to share with you a history of some of the stages through which we progressed in Madison in an attempt to serve people with severe intellectual disabilities in public schools. Then I'd like to share changes in the goals that we have set for the people in our society with the lowest intellectual functioning. Changing goals is relatively easy; the problem is, of course, that once you change a goal, you have to change practices and ask whether practices are effective in achieving the goals that we set for ourselves. I want to share some of the practices in which we used to engage and that we used to feel good about, and that turned out to be not so good. Finally, I'd like to share some of the things we are doing now that clearly result in a better quality of life for students with severe handicaps.

There was a time when people with severe intellectual disabilities were not really a problem in society. They were not a problem because infant mortality was extremely high and life expectancy was extremely short. Then we had World War II. Large numbers of people went away to fight this war; many were hurt, wounded, injured, traumatized in various ways. As a culture, we devoted tremendous resources to saving the lives of these people when they were hurt and got wounded, and getting them back to normal as quickly and graciously as we could when they returned home. We trained a lot of people, and spent a lot of money on instrumentation, resources, chemicals that would keep people alive and get them back to where they were before they left, or close to where they were before they were hurt.

After the war ended, these people came home, and, as you know, anytime large numbers of males come home, we have a baby boom. So we had our post war baby boom. People planned to have three or four children in those days. So they had their children -- and one of them was severely disabled. Prior to the war, that child probably would have died at childbirth or lived a very short life. But after the war, we had trained people and information and could now keep these kids alive.

Parents would bring these kids to the public schools. We educators would look at them and say things to ourselves and under our breath, and say, "We're really sorry. They are nice kids you have there, but we don't serve kids like that in public schools." They said, "OK, what do you think we should do?" "We don't know." So they went home.

What did they do? Well, the people with a lot of money sent their kids to residential centers, funded by family resources. Very few people had that option. Other people put their kids in institutions. In reality, most people simply kept their kids at home.

So then what happened when the mother wanted to go back to work or decided she did not want to spend 24 hours a day, seven days a week, with a child who was severely disabled? Parents found each other. Then they found some wonderfully creative and dedicated person to set up a little place in the church, or a little store front, where they could set up a little cooperative for their kids. We heard about it. We in education love things like that because now we have a referral.

Now it's interesting to say that you work with people who are severely intellectually disabled. We know many things about them now. Two things are very relevant here. One is that they don't reproduce themselves. People who have kids with severe disabilities are not people with severe disabilities. The second thing we know is that 1% of the babies born in the United States next year will be severely intellectually impaired. Every year they come. Now if people with severe disabilities are not producing people with severe disabilities, who is? The answer is all those people driving those cars. All those people who are going to be at the airport. All those people you are going to pass on the street. All those normal people out there; that's who has them. So that meant every year new parents came to us.

Well, when these new parents, came in, we said, "Oh lady, you know we don't have a program, but you are so lucky. The parents that preceded you said you should go over to that Happy Days Center, or Up with Downs Center, Candle of Hope, or Sunshine Place." Most of the parents thought those separate programs were wonderful. We felt that way, too.

Then you hit this problem. You know what I'm talking about. These parents, you know, 99% of them are nice, sweet, rational, warm. You tell them what to do, they do it. But 1% of them are weird, serious problems. They came back and we said, "What's the matter? I mean everybody's happy over there." And they said, "Well you know, they told me that I should watch the United Way bubble on the highway and when the United Way bubble got up to $300,000, they might be able to get a physical therapist. I tell you what fella, I pay my taxes. I don't want to wait for the bubble. I want my kid to have a service now. Get him a service." So, they got together and they started writing letters. They came to school board meetings, and they asked questions: "You know my family can go to a public beach, and there's no problem. We can go to a public park, and there's no problem. We can go to a public library, and there's no problem. Why is it we can't go to the public school?" You can't talk like that to school board members. They don't understand concepts like that. Well, you know the story. There were many people involved. What happened is you got this law passed. Now we have to serve the kids. Now the law said all handicapped children.

But we in education knew that it did not really mean Joey and Charlie, so we went through this "oh, but" phase. Of course, that didn't work, so we had to serve the kids. So what did we do? We had no experience. We had no history, no literature on serving these kids in public schools. So we looked at what the parents did. We felt that made sense and decided to do that. What did parents do? They set up these little places for kids with severe disabilities, so that's what we did. All over the United States, we had these little cookie cutters, and went around stamping out these retarded schools. And we felt good. We thought it was a great idea.

We had one in Madison: Badger School. Now parents would come in, and would like to enroll their child in public school. We said, "The people that preceded you, boy, you're going to love it here. We have more stainless steel and ceramic tile than any school in the state. There's a canopy that goes for miles from school so your child will never experience a snow flake or rain drop. This is the perfect place." The number of students at Badger School grew to 160. One day a mother walked in and said, "I looked around my neighborhood and there's a school right about where we live. My daughter goes to Sunday School in the neighborhood. We have friends at the day dare center where she goes, and we play in the park near home. We thought maybe she could go to the school in her neighborhood."

We said, "Yes ma'am, but have you considered her therapy? You know what's going to happen to her? Have you not heard about rape, molestation, exploitation, abuse, ridicule?" So we thought we'd show them. We set up a research study. We got a group of kids whose parents wanted them to go to school with normal people. Then we got parents who said it was OK to put their kids in retarded school. Every month we'd measure everything -- language, social, motor -- and we'd keep track of our data. Around March or April it became pretty obvious that the kids that were going to the regular schools with the normal peer models and friendships were doing better. So we had a meeting, of course, and concluded we could only do what was fair and decent under the circumstances: We tossed the data.

The problem with these weirdo parents is that they don't care about data. They would come and they would see their kids playing with normal people. They would be around others and it would rekindle some dream that they had. They'd bring other parents and say, "Hey, look at them. Wouldn't you like that?" "Yeah, I'd like that." Then they would recruit, and expand and infiltrate, you know. So we had to set up another class, and another class, and another class.

We used to have 160 happy retarded people in our segregated facility, and now we are down to 50. Now, I don't know what you know about school superintendents. School superintendents are different than other folks. They are only concerned about cost figures for the district -- capacity, enrollment, cost per person. So he says, "Close it. You can't have it. A school built for 300 people cannot serve only 50." So we had to close the school.

What do you think we did? Well, we set up this school closing committee and put in all the factors you consider when you place a student with disabilities, and they, of course, are not all equally valued, so you have to rank the highest and the lowest and pretty soon you get that single most important factor in the placement of a student with disabilities in a school program -- space. Wherever you have the space, that's where you put them. So, we looked around for space for 50. There was space in an inner city elementary school, so we put them there.

Who do you think we put there? The youngest kids? Nah, the oldest because with them, the parents had fought to get the segregated school, you see. The most able people? Nah, the people with the most physical difficulties. The best behaved people? Nah, the people with autism. But now we have 50 people, mostly old and with severe disabilities, in one great big pile in an elementary school, and at recess time we'd see 19 and 20-year-old people with autism going out on the sandpile playing next to people who are 5 and 6-years-old. Somehow it didn't look right. So we went to chronologically age-appropriate schools, which is what we hear a lot about now, and clustered schools, and the 504 schools that had a ramp and an elevator, and we set up these little pockets, these little pods around our city, and we were so happy. All of our students went to chronologically age-appropriate regular schools, and we felt really good.

Sorry again. It was nice, better than it was, but we keep comparing ourselves to what we did last year. Somehow we never get to the point to compare ourselves with where we have to be tomorrow. It's always better than it was. It's never what it should be, you see. So we could enter the clustered schools, but then we had to get out. Why? One day a woman walked in and said, "I'd like to enroll my child, Andre, in school." "Well," I said, "we'd like to enroll your child in Shanks School." She said, "Shanks School, where's that?" "Well, you see you live right next door to Marquette School, and Shanks School is the next one over." She said, "You don't understand. You see Andre goes to the day care center with normal people. Andre goes to church with normal people. Andre plays in the park with normal people, or normal people come over to our house and play with him every day. I want Andre to go to school with normal people." We said, "Ma'am, you see, we don't have enough kids like Andre to set up a class in your neighborhood." She said, "I don't want kids like Andre in a class with Andre. I want him put in a class with normal people." Here it goes again. So then we had an Office of Civil Rights Investigation. We had a due process hearing, and, of course, we fought. We resisted it.

If you don't think that's not bad enough, then we had the Japanese. Oh, the Japanese. These parents came in, and they said, "You know, the boy's 20 now. What's next? It's his last year in school. What next?" We said, "We're responsible only until 21; after that we're just not involved. You will have to call somebody else." They said, "You mean to tell me you served my child for 15 years, you're not responsible for what happens to my child? You're not involved in what happens next? Let me tell you something, buddy. I work with General Motors, and that's what we used to say. Then the Japanese came by and beat the heck out of us. Now people want to know if our cars work. They say we are accountable for what we produce. They say we're responsible. Well, if I have to be responsible for my products, what about you?"

Can you imagine parents talking to us professionals like that? So, we checked our products. We did a follow-up study. Studied all of our graduates from a wonderful school program from 1971 to 1978. In eight years, we had 53 graduates that were severely intellectually disabled. Three stayed home and did nothing; 49 went to workshops and did nothing; and one had a subminimal wage job as a dishwasher in a luncheonette. We were embarrassed. Is that the outcome we want? Is that what we mean by accountability? Is that what we mean by responsibility? We said, nah, there's got to be something better than that.

It's different now. Our goals have changed. What we want for the people with severe disabilities has changed. We want people to live, work, and play in the real world, next to real people. Now, with this change in goal, let's look at what we're doing to see if it meets our goal.

We have serious problems in Wisconsin. We have a lot of -- well there's no nice way of saying it -- we have a lot of farmers. It's tough having farmers. These farmers came in from their farms and brought their child with them. We assessed the child at the big, well funded, multidisciplinary university clinic. Then on

Friday, we brought the farm family in and sat them down and said, "Your child has a mental age of an hour and a half. Now, let me tell you what that means. See, we know we can teach your child many things, no doubt about it, but the problem is your child is going to learn fewer things than everybody else in the world. Do you understand that? What does it mean to you, sir?" You know what he said? "Then don't teach him dumb stuff. If he can only learn a few things, then don't waste his time."

You know how we do, we take a step back and think about that. "Now, we could spend a lot of time, a lot of money, a lot of effort teaching your child but, if he doesn't practice, he'll forget. Now we all forget, but your child is going to forget more than 99% of the people in the world. Not only that, but if you want to get him to where he was before he forgot, it's going to take just as much time the second time as the first time." You know what they said? "Don't give him three months off in the summer." That's who I'm talking about. People who learn fewer things than everybody else in the world; take longer to learn; if they don't practice, they forget. Now the question is, can we arrange for them to live, work, and play in the real world? Well, you have to sort of look at some stuff.

In special education we believe in homogeneous grouping. "Your boy has autism." "Well, I guess that's better than being retarded, but what is it?" "Well, autism is when your child has this tremendous propensity for doing the same thing over and over and over." "He's got that." "In addition, sir, autism is when your child has a very difficult time communicating with other people in ways that other people typically understand. I guess maybe the toughest is that, well, it's very difficult for your child to establish meaningful, social and emotional relationships with people." "Yeah, he won't even play with his sister. Well, what do you think we should do?" "Oh, don't worry, we have a program for kids like that. Your child is three now, and for the next 18 years of his life, we're going to put him in a little green room with six other kids who self-stimulate all the time, don't communicate with anybody, and don't establish social and emotional relationships with people." And they go, "Oh, then what." "Well, don't worry we have the autistic enclave. The rest of his life, he's going to sit at a bench with six other people with autism, and he'll be settled in a group home with several people with autism." "Oh, well, then what?" "Well, then we get to a point where we have a special wing in the county nursing home. Then we work it out to where we have a special cemetery plot over there..." You see, we in special education believe that you absolutely must spend the rest of your life with people with the same characteristics.

In the early 1970's, these parents brought this young man to school. We looked at him, and we saw that the kid came to school on a slab. So we called an emergency meeting, and it was the conclusion of the multidisciplinary team that we obviously had to set up a slab class. I mean, you can't have slabs and non-slabs in the same room. You need a teacher with a master's degree in slabs. We had to ask ourselves what we were going to do. In the process, days went by, and this kid would keep coming to school. You know, we'd have to sort of spend some time with him. Question: How many minutes a day should somebody look in his eyes? How many minutes a day should he look at the floor? How many times a day should somebody touch his body? What sound should he hear? What movement should he be taken through? What words should he hear? What colors should he see? By answering those questions, you come to the conclusion fairly quickly that the last thing in the world he needs is to be next to somebody else on a slab. He needs to be next to people who can give him all, can touch him, emotionally relate to him. That's what he needs.

This young woman came to school with a severe cleft lip and cleft palate. What if I said to you that this person is three years old, and for the next 18 years of her life, five hours a day, I'm going to put her next to people who go "umyumyumyum" all day long? I'm going to ask her to get ready for the real world, right? Eighteen years. Please don't do that. Please don't do that to her. Give her a chance. She needs the best possible language models we can find, not the worst. We need to teach people with disabilities to eat in regular cafeterias, next to real people. We have a lunch buddy system. We have integrated music with kids with or without disabilities in the same music class. This is Peter going to a regular third grade class for his reading instruction. We also have a class sponsorship program where the regular fifth grade sponsors a fellow student with a disability, which means that they play with her until the bell rings, they drop her off at her special class, and then she's with them in art, and music, and recess.

This is what we want: touch. How many people in the United States Congress grew up touching kids with disabilities? How many people in the Indiana Legislature grew up touching people with disabilities? How many employers who want to give our kids jobs grew up touching kids with disabilities? How many? We can no long afford another generation of people who don't grow up touching folks with disabilities. The price is too high.

Well, you can always say, what about those little kids? It's easy there, but you can't do it in high schools? With people who grow up together; it's different.

These farmers brought their kids to us. We assessed them and we said, "Your daughter is chronologically three but developmentally one." There was a, "Phew, my, what a relief. We thought it was worse than that." "What do you mean. That's pretty serious." He said, "Well, two years behind. We thought it was a lot worse than that." "What are you trying to say?" He said, "Well, you know, I know she's not normal but if she's only two years behind, when she's 21 she's going to be like a normal 19-year-old." There we go with what we're driving at. "No, no, you see it's going to work like this. Your child is three now and she's two years behind and we're going to put her in special education, and the longer she's in special education the more retarded she's going to become." Then they looked at each other not understanding any of this. "You see, there's very little difference between her and normal people now, but when we get done with her, boy, she's going to be really different." And they said, "How are you going to do that?" "This is how we're going to do it. You see your child is developmentally one and we have to start there. Now what we're going to do is get her to be developmentally two." I mean, everybody in the room has been through this. Sure, that's what we do. So here's normal two year old language skills; we're going to teach those. Here's the normal two year old motor skills; we're going to teach those. We set about our task. Well, what else do we know about people with disabilities? It takes them a long time to learn. Does your child get to be developmentally two? Sure does. What's the problem? She's nine. So let's have a great big party, a cake with two candles in it or a cake with nine candles in it? Yeah, now what are we going to do? Well, get her to be developmentally three. How do you do that? Well, these are the language skills of the normal three year old, so we do it again. Now she's 15. And what are we doing? The clock ticks, and she gets closer and closer to 21, and we are teaching her to act like a normal infant. That's how we do it. We don't get people ready to live, work, and play in the real world. We teach them to be like normal infants. We call this "neg-tech". You have hi-tech, low-tech. Neg-tech is when you have a significant problem with development of a human being, and you spend a long time on it -- 21 years -- and millions and millions of dollars, and, in the end, it's worse off than when you started.

These parents came in and said, "Well, I was thinking about maybe a job for Joey." I said, "Okay, I'll check on it." So we went to check with our team about a job, but his occupational therapist went, "A JOB!" So, we brought the parents in and we said, "You know, we discussed it, thought about it, but with your child, I know he's getting to be close to 21, but no job." Then the parents said things like, "But, he's had 18 years of occupational therapy." When are they going to learn, these parents? They think that occupational therapists exist so their kids are going to get jobs. Their kids exist so occupational therapists have jobs!

This is our retarded bus. In the good old days, when parents came to school twice a year to see their child's progress, we'd take them to the gym. "Hey, what do you think of that?" One lady said, "I'm so sick of this. Will you please stop it? Take them downtown." So we did. We took our best and the brightest, people who for years and years and years had been learning retarded bus riding skills in a cardboard bus. We took them downtown. They flagged down ambulances, jumped in front of tractor-trailer trucks. We said, "What's going on here? What is it? We've been spending all our time teaching these kids to do these things. Yet when we take them downtown, they screw up."

The purpose of education is not to teach people to live, work, and play in the school. The purpose of education is to teach people to live, play, and work in the real world, so let's see how it's doing. I ask you to do this very simple thing. It's called a transfer chart.

We said, "Well, ma'am, from 8:30 to 9:00, this is what we're teaching your daughter in pre-reading. Now does she ever call out that word when you're driving in the car? Can you think of any time when she's using these words that we're teaching in school?" "No." "OK, from 9:00 to 9:30, this is what teaching her in pre-math. Now, does she ever count backwards with Big Bird? Can you think of any time in her life when she's using the math skills we're teaching her?" "No." "This is what we are teaching her in pre-language. We've got this plastic bowling ball. We roll it across the top of a table and tell her to track it with her eyes. When she got really good at it, we put a piece of styrofoam in front of it and we rolled it behind the styrofoam. She removed the styrofoam and picked up the ball. We call that an object permanence skill. Is there any time in your child's life that she uses an object permanence skill? Ma'am, can you think of any thing we're teaching your child in school that your child is using in any other part of her life?" What if I said to you, "I have a master's degree in special education, 10 years teaching experience, and absolutely nothing that I teach my kids in school do they do anywhere else in their lives. I want a raise." So, please do a little simple transfer.

We want students to do real work in the real world and to live in integrated communities. What do we do about it? Take them into the real world and teach them real things.

This is Bob York. Bob York is now the Associate Commissioner of Mental Retardation for the State of Minnesota. Here he is teaching body parts. In special education, that's what we do. How many years have your children been exposed to body part instruction? One thing about the people we're talking about is that no one's ever said, "You know the more retarded a person is, the more they learn from abstractions." The more tangible, the more concrete the experiences, the better off it is for them.

One day we had a practice teacher who practice taught with us in the morning, then she worked at a clothing store downtown. One Monday she brought in two mannequins, a male and a female. She put it up next to this drawing. Think about that. When we thought about concrete versus abstract and we put those mannequins next to the picture, it was such a superior instructional material. We had the form and the depth. We had so much more. The only problem was the male mannequin didn't come with genitals, so we called a genital meeting. We listed our options and then went through them one by one to make a decision. Somebody said, "Let's just use the old material." "God, you can't use the old material. These are so superior." Then somebody said, "Let's teach all the parts except that one. That's the part that's driving everybody crazy in the first place." Finally, we requisitioned a dildo. A couple of weeks later, I walked down to the school and Sue said, "I've got to talk to you a minute. Look at this." She showed me a piece of paper that said, "1 dildo, not over $24.95. Approved petty cash." She said, "Well, what do we do now?" I said, "What do you mean we? It's your classroom? Go downtown and buy one of those things."

"Ma'am, this year we'd like to teach your daughter Susan to stop her electric wheelchair on the curb at Regent and Park Street in traffic, three out of five times, four out of seven days. Will you please sign here?" Would you tell me where we get those numbers? I mean, it sounds so scientific. Really, though, we ought to have this rule that says the more important the skill, the more natural the criteria. Well, we looked to nature. We looked to the real world. Is 30% of the time good enough? Well, gee, you know Pete Rose, the Hall of Fame baseball player with a lifetime batting average of 308. That means that every 1,000 times he gets up to bat, he makes an out 700 times. Hall of Famer. The more important the skill, the more natural the criteria. If we're teaching people to live, work, and play in the real world, we must use the criteria that are established by the real world. So now, put it all together: plastic fruit, teaching old people to be normal infants, touch responses. Put it together and what do you get: One graduate in eight years who will do real work in a real world; everybody else is locked up for life.

In 1975 or 1976, we had some parents who said, "That's it. No more. Try another way." We had some teachers who were young, vibrant, talented, and creative, and they would look down the hallway and see other teachers who were 55 and 60 who would all be doing the same thing with all of their students. The young teachers would say, "Is that what it's going to be like for me at age 60? Is that what I'm going to be doing? There's got to be something more than forty years of pegboards. Do you know what forty years of pegboards does to your mind?" We began to do something different.

We did another follow-up study from 1979 to 1983. We had 50 graduates; 10 are in activity centers and workshops, four stayed at home and 36 went to real jobs in the real world. They're still there. We just finished with our 1986 follow-up study. We had 32 graduates. Three live in an institution, and we're trying to get them out of the institution. Twenty-nine live in the community and all of them have real jobs in the real world. Nobody is on a wait list. Nobody is in the segregated environment.

Now, how do you go from one out of 53 to 29 out of 29? Is it magic? Does it cost a lot of money? Do you need high tech equipment? That's what I'd like to talk to you about now. It's no big deal.

In the 1970's, we started to think about our lives, we professionals and parents, and the people we represent who are so vulnerable. It is very difficult for them to take actions on behalf of themselves, so we have to sort of do it for them. It's very risky, but we do it for them. So the question then becomes what do we want? Let's think where we ultimately want these people to be. What kind of quality of life should they have? What do you want? What do I want? I want to live in a nice home. I want to do meaningful work. I want to have fun with my friends, and I want to experience the richness and variety of our country. So we started saying things like, everybody should live in a decent home -- no more institution wards, no more group homes. People with severe handicaps should be able to live and work in the real world. They should have fun with friends, and they should use the community. If that's what you want for your kids, let's talk about how we get there. Now we say we want to teach chronologically age-appropriate, functional skills in the real world. Why is that? Well, we tried to teach developmentally age-appropriate skills and what we did was teach kids to be infants, and at age 21 they were more like normal infants. That's no good.

Why should we look at community-based programming? Here we have a room. It's a very nice room and we are nice people. So now we have two of the basics of a decent quality of life, nice people and a nice place. Let's say something happens, some kind of explosion, or earthquake, and this ooze envelopes this room and we're here. We're mature, rational adults who know that others know we're here, so we just go ahead and have an open discussion, figure they will be here soon. Well, they don't come and we spend the night. So now it's this time tomorrow. How are we doing, we nice people? We're mature, rational folks, in this nice place. Spend another night. How we doing now? How long would it take before someone would join me in the corner where I sit sucking my thumb? How long before we get antsy and angry and yell? Our escape committee somehow figures out a way to get on the other side of that wall. Now we have two rooms. Are two rooms better than one? I mean in terms of the quality of life? Of course they are. Now we can get away from that nincompoop who has been driving us crazy for two days. Now we can have gender privacy. That's important for most of us. Now we can play hide and seek. Sure two rooms are better than one. We find another room exactly like this. Three room exactly like this. Are three rooms better than two? Sure. Now we can have Catholics, Protestants, other; male, female, other. Are four rooms better than three? Five rooms better?

Years ago, before that law, life was easy. Then they passed this law that said that we had to ask the parents what they wanted, and they said big things like, "You know, my child has no friends. Could you help me with that?" And we said, "No, no, it's just not possible." So we went on with pegboards, and body parts, and the next parent came in and said, "My child self-stimulates in a room all weekend. I can't do anything about it. Could you please help me with that?" The question is, how many years can you hear that? How many stories do you have to hear about after school, on weekends? So we started thinking. Maybe some of the things we're doing in school relate to what somebody is going to do after school, on weekends, summers. We started thinking about it more and more. So we took an old special education thing called life space. We started getting information about peoples' lives -- where they are and who they are with 24 hours a day, seven days a week. You find many things when you do something like that. One thing you can find out is the number of rooms people with severe disabilities go in and out of. House, bus, school, bus, house. When they graduate: house, bus, workshop, bus, house. Compare that to the number of rooms you and I go in and out of every day, every week, every month and those that normal children go in and out of, and there's a dramatic difference. What you see is a horribly constricted life space.

We used to think we'll get this kid and teach him a lot of skills, and we taught these kids thousands of skills and then they locked them up the rest of their lives in workshops and activity centers. Now the question is, how many environments do you want your child to go in and out of every day in his life? How many rooms? If you teach a few skills and a lot of rooms, you have a better quality of life than if you teach a lot of skills and a few rooms. This of course has tremendous implications for school programs.

Now, I want to teach functional skills. So, what's functional? Well, let's see. If the person with the severe disability doesn't do it, somebody else has to do it. OK? Simple. Now here's a young man who we're teaching to put fluid in his body. Is it functional or not? How do you know? You don't know until you ask the question. If he doesn't do it, is somebody else going to have to do it? Yes, because he must have fluid in his body; it is a functional skill.

Here you are teaching this young woman to order food in the restaurant. If she doesn't order food, is somebody going to order it? Yes. So it's functional. If she doesn't buy those groceries and take them home, is somebody else going to buy those groceries? Yes, because that's the groceries for the family. Now we do this as part of the school program and then turn it over to family. If he doesn't vacuum, is somebody else going to vacuum? Yes. So it's functional. If she doesn't make her breakfast, is somebody else going to make her breakfast? Yes. So it's functional. If he doesn't dust where he lives, is somebody else going to dust? Yes. So it's functional. You see what I'm trying to tell you.

I'm trying to say that if you put these kids in little rooms, you've run out of ideas, but if you expand to other rooms in which they function, you run out of time, but you never run out of ideas. The things that are important for them to learn, they can learn. You don't hit their level of complexity.

If she doesn't participate in the selection of her clothing, are we going to buy it for her? Yeah. Is it going to be what she wants? I doubt it. Choice is the new thing for everybody now, giving people decent choices.

Here's a young man who was born totally deaf and totally blind. He spent 18 years in the state institution where he ripped out his hair, pulled off his clothes, and ripped out your hair and your clothes if you got near him. Then he got an advocate. Now he comes to Madison Memorial High School. What are you going to teach a kid who is totally deaf and totally blind that is chronologically age-appropriate, functional, real world after 18 years in an institution where he ripped off his clothes and pulled out his hair? Now they tell him to find a tactilely coded track on the wall, find a locker coded with tactile numbers , and hang up his coat. Is it functional? I don't know. Let's see. If he can't hang up his coat, is somebody else going to hang up his coat? Yeah.

One of the kids in school got to thinking about what it is like to be totally deaf and totally blind and to spend years where the only people you've been around are other people who are totally deaf and totally blind or people who are paid to be with you. So this kid, an honor student, went to a sociology honors class teacher and wanted to do a project on him. The deaf/blind student became his project. So they worked it out with the special education people and, in the process of conducting a project on deaf/blind, this kid became his tutor. In the process of becoming his tutor, he became his friend. Now, instead of going to the institution ward, he goes downtown with his friend to a fast food restaurant. The woman at the restaurant finds out that he can't see or hear and asks his tutor what he wants. "Well, you ask him by touching him on the back of the hand." The woman says, "Can't you just tell me? I'll get it quickly." "No, just reach out and touch his hand. He knows where he is, he can smell." After she touches his hand, he reaches into his pocket. He doesn't know what it is, but he comes out with paper with Coca Cola on it and a little dollhouse hamburger.

Can you teach somebody who is totally blind and totally deaf and who has spent 18 years in a rotten institution ward? Sure. Wouldn't it have been easier if we had started sooner? Sure. Would it have been easier if all the people in the community grew up with him, went to school with him, learned to communicate with him? Sure.

Here's a young woman playing ball with one of our students. If she doesn't play ball with one of our students, is somebody else going to have to? No. So it's not functional, but it's nice. Here's a young woman reading to one of our students. If she doesn't read to him, is somebody else going to have read? No, but it really helps. If he doesn't play in an arcade, does somebody else have to? No, but he really likes to do it. If he doesn't play with the parrot, look at the fish in the pet store, is somebody else going to have to do it? It's not functional, but he loves it. If you only do functional things, there's not much to life. Now, if you can't do functional things, there's not much to life either. You know, tonight, I'm going to try to get home in time to watch my son play the last inning of a baseball game. If I don't watch my son play the baseball game, is somebody else going to have to watch my son? No, but I really want to do it. Then I'm going to go home and take a hot tub with my wife. If I don't take the hot tub with my wife...

I'd like to put some things together. I'd like to share a simple, practical, common sense technique that we use to come up with a what to teach somebody. First, you ask the parents what they do as a family. If you find that they frequently go to McDonald's, you determine what you need to get that kid to function at McDonald's. So we studied how nondisabled people go to a particular McDonald's restaurant. What do we do? What do I do? What do you do? Well, you get out of the car. You walk to the door, open the door, wait in line, order your food, you know. So we take your son, your daughter -- not a class, not a syndrome -- but a son, a person, a citizen, a daughter, and he gets out of the car. No problem. He walks to the door. No problem. He opens the door. So far, he's not disabled in any way. He's not different in any way. He waits in line. No problem. He gets to the counter, and he can't talk. Now for the first time we have a difference between your son and everybody else. What do we do? Well, we could teach him to talk, but he's 21 years old, this is his last year in school. He has had 647,000 hours of speech and language therapy, and there's not a reasonable probability that he will learn to talk by the time the school year ends. Well, maybe that's not the most efficacious educational option. What do we do now? We could order for him. What's the problem with that? Well, any time we do something for somebody that they could be doing for themselves, we're retarding them. What's your option? I could, well, give him a picture of a hamburger, fries, and a Coke. Then he can put his pictures down for his order. What have we done? We've increased the number of rooms in which he can function and we've enhanced his functioning in a number of rooms. There is one way to figure out what to teach somebody. Take him to a real environment, find out how he's different and then minimize the difference. No big deal.

Next things those farmers said, "Why did you pick that? Of all the things in the world you could pick to teach my child this year, why did you pick that?" Parents, if you would go into every IEP meeting and ask "Why?" about everything that is written, you'd have us. "So, I'll tell you why, lady. I'm going to teach your child that because it's chronologically age-appropriate." She said, "What does that mean?" We said, "We know your child is never going to be able to do everything that a normal 21-year-old person can do. But, you see, he can do some, and we're going to find the ones he can do and that's what we're going to teach him. That's why." "Why are you going to do that?" "Well, because it's functional." "What does that mean?" "Well, you see, if he doesn't do it, somebody else is going to do it and we want him to do as much as possible for himself. That's why we teach that." "Why are you doing that?" "Well, because your child, even though he has this serious hearing problem, loves music, but he turns it up loud and it distracts everybody. So we're teaching him to put on his own headset. We've adapted this tape deck so he can control the intensity and he can set it. We're teaching him that because he wants to do it. It's his choice." Parents want it to make sense.

See that kid struggling to open the door with a stick? Why did we teach that? Because it enhances his status. People think better about him. People value him more. Oh, we can teach him to put a peg in a pegboard, but what does that do to his status?

It takes seven years to be a speech and language therapist. Did you know that? Four years of college, two years master's degree, and then one year under the supervision of a pro. Then we hired them in special education because you parents wanted speech therapy for your kids all the time. So we hired them, but they always want the smallest room. Did you know that? The speech and language room with the quarter moon shaped table covered with formica. The speech and language therapist sits on the inside of the table with the children around the rim. I like to watch them work because they're always so pretty. So I went to the little speech and language room and the speech and language therapist goes "pssssssssss", and the kids go "ptttttttttt." So, I say, "Beautiful young person with seven years of higher education, why do you do that? Of all the things in the world that you could do, why did you pick that one?" And she answers, "No problem. Lesson 7, page 42, Flappydo Language Development Plastic Fruit Kit." Well, I know the guys that made the Flappydo Language Development Plastic Fruit Kit. They're in Hawaii in a big condo with the Pacific sunset while you're sitting in this little room getting spit on all day. You mean to tell me, sitting in Hawaii is somebody who is going to decide what you do with your kids, and you don't have anything to do with it. I mean, come on. Sell those kits.

Consider your personal lives. Think of all the things that you have learned in your life time. Then take and put the really important things on the top. How many things did you learn in school? That's the real question. Now where should you provide education to people with severe disabilities? Some people think we should provide educational experiences to people with severe disabilities in a physical premises of the school because that's where the normal kids are. Good, what else? Well, because that's the law. Well, fine. Because parents want it. Right. It's always been done that way. Right. Liability. Right. Well, it's like any other kind of educational theory. What are some of the problems with providing 100% education of a child with severe disabilities on the physical premises of the school? One problem is that they don't generalize. After that, you've got to lock them up for the rest of their lives. Second problem is, the things that are important to know, that we can teach them, can never be taught in school. So we say that anybody who provides educational experience for persons with severe disabilities only on the physical premises of the school is remiss in their professional responsibilities. It is unacceptable in this day and age. As chronological age increases, you try to phase school out so that during the last year of school they spend very little time in school because we're trying to get them to do real things in the real world. The closer the training materials are to the real materials the more transfer you get.

Question: When you talk about the people with severe intellectual disabilities, what kind of instructional materials should we use? The real material.

I am a teacher trainer. I love being a teacher trainer, and I say to you parents, "What do you want from the teacher? You and your family work hard and make money and send your money to the state capital and they send a little bit to the university and I get paid. I work for you. Now I really work for your child, you know, but I can't ask them. They don't talk too well, so I'm asking you. What do you want from me? I'm the guy that produces the teachers that are going to touch your children. What do you want from me? I mean, do you want a dumb teacher? No, you don't want a dumb teacher. When you get to it, our kids need only smart teachers. You want me to give you the best and the brightest to touch your children for 21 years, and yet your children are locked away from the best and the brightest in these segregated schools, so when students come to the university, they don't even know your kids let alone major in your field. That's a serious, serious problem. I don't think you want a teacher who is really good when you visit the classroom, but who, as soon as you leave, will stick the kid in the corner and let him self-stim all day. You want a teacher that you can trust, have confidence in, that's going to give your kid a fair shake. How about if I get you a teacher who's really good September, October, November and then sort of gets bored? No, you want a teacher day in day out who gives her best. How about a teacher that the minute the bell rings, zoom she's out in the parking lot in her big caddie? No, you want a teacher that reviews the events of the day, plans with them for tomorrow, shares with people. You want a teacher that's creative, genius, dedicated, committed, trustworthy. That's my job. That's what I have to do for you.

See this kid? We used to take him to the park on retarded days. The aide would pick him up and take him to the top of this sliding board, and the teacher would be on the bottom reaching out. He would physically guide him down and within maybe six inches, free him and let him experience wind in his face, then catch him, carry him back and pick somebody else up, carry them. Then the teacher's back goes. He gets tired and then he decides not to do that anymore. Then he put your child down there in the dog shit and the dirt and spit and said, "Go for it fella." Then do you know what the kids did? They got up on their own and they pulled, they crawled, they scratched. The adrenalin was flowing, and he was excited about it. "Come on Joey, come on." He's not burned out now. He's all charged up. Then he hears, "Hey! Don't you see he's handicapped. Pick him up." We're sorry. We're trying to teach him to be the most that he can be, so we want him to do everything he possibly can for himself. "What's your name? I know the Superintendent. Pick him up. He's handicapped. Carry him. Do it for him."

We spend a lot of time now, maybe not as much as we should, teaching people to achieve, to do the best they can, or maybe a little beyond. But we need to try a little harder. Achievement, motivation. Take your body and shape it as best you can. Lift up. Push, pull. Then when they get into adulthood, they start feeling a little pride. They can do something with their body. They can do things in the real world. And, when they do something in the real world and they see other people think it's good, they feel good about themselves. That's what we're talking about, getting people with severe disabilities so that they can do something that we can all feel proud of. That's not pegboard pride. That's pride to do something real in the real world. Thank you so much for coming. I wish you all well.

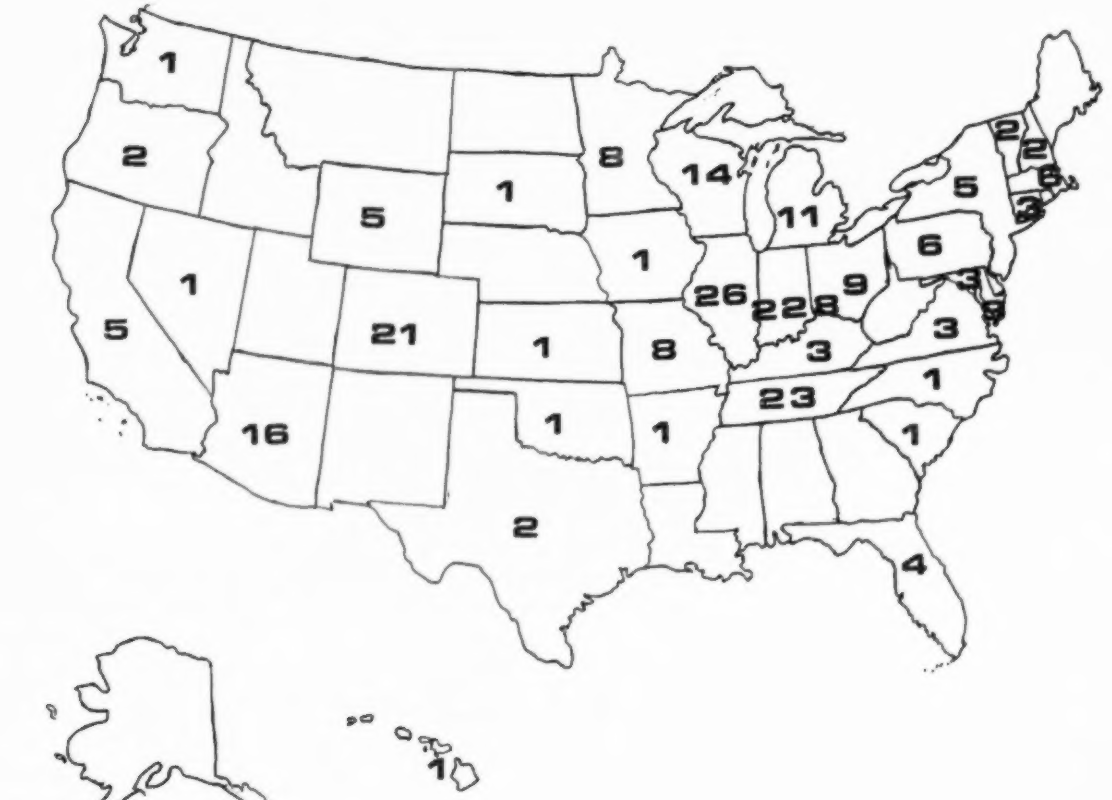
THE
NATIONAL LRE
NETWORK

1987 National Leadership Conference
Least Restrictive Environment: Commitment to Implementation
Indianapolis, Indiana
May 20, 21

EVALUATION SUMMARY

The 1987 National Leadership Conference "Least Restrictive Environment: Commitment to Implementation" was made possible through the U.S. Department of Education, Office of Special Education and Rehabilitative Services; Nat Jackson and Associates of Olympia, WA; The Indiana Department of Education, Division of Special Education; and, Indiana University Developmental Training Center.

Thirty-five states were represented at the conference. Numbers shown in state boundary lines refer to the number of individuals who attended from that state.



The conference included 34 presenters and attracted 436 registered participants who were:

Directors of Special Education	41
Superintendents	15
Principals	30
Teachers/Related Staff	89
Parents	89
Agency Administrators	32
Higher Education Personnel	40
Others	100

The "other" category comprised a broad range of individuals including consumers of DD services, agency planners, attorneys, consultants, and rehabilitation engineers.

The conference was designed to present the needs of principals, state and local directors of special education, parents, teachers and related staff, community agency executives, teacher trainers, and advocates -- related to students and young adults with severe disabilities -- it was the first of its kind ever held.

The overall goals of the conference were to

- o Demonstrate that collaboration among policymakers; local public school administrators, staff, and parents; and university professionals can result in system change;
- o Identify standards of best practices;
- o Demonstrate the effectiveness of exemplary school programs;
- o Examine strategies for change; and
- o Explore parents' role in program changes.

Participants indicated that these objectives were met within a range of 3.7 to 4.1. Ratings in combination with audience comments indicate that "identifying standards of best practices" was the objective most effectively met.

Expressions of general impressions of the conference covered a broad range: "excellent...very well organized...good coverage of issues...first class...opened my mind to LRE...." Others expressed: "I'm not sure it was persuasive enough for people who are struggling with the question -- Why should I close our special school when it's working... not enough specifics...wanted more information on how the actual classroom is run...I get very depressed when I think of where we are in the state...we need this information in every state."

Each of the five plenary sessions and seven concurrent sessions were evaluated. On a five point scale where: 1 = poor; 5 = excellent, plenary sessions ranged between 3.7 and 4.4.

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Ratings for the concurrent sessions are presented below.

Item	Session 1: A Collaborative Model for LRE Statewide Implementation	Session 2: Parent's Role in Quality School Programs	Session 3: Developing District Level Support for LRE	Session 4: Developing Building Level Support Among Administrator and Student Body	Session 5: Teacher and Related Service Staff Preparation	Session 6: Planning for Post School Transition	Session 7: Building Opportunities for After-school and Out-of-school Integration
1. The objectives of the session were:	3.7	4.3	3.4	4.3	4.1	3.9	3.5
2. The organization of the session was:	3.8	4.5	3.7	4.4	4.4	3.7	3.7
3. The knowledge and preparation of the presenter(s) was:	4.0	4.7	4.0	4.2	4.2	4.2	4.0
4. Given the allotted time the extent of content coverage was:	3.5	4.0	3.3	3.5	4.0	3.5	2.8
5. How useful did you find the content of this session?	3.5	4.2	3.1	3.6	4.0	3.8	3.0
6. Were the concepts, principles, and techniques explained in an understandable manner?	3.8	5.0	3.8	4.3	3.9	3.7	3.7

The 1987 National Leadership Conference reached an audience much larger than those actually in attendence. Conference announcements went to every state and territory in the country. They were disseminated by electronic mail, newspapers, professional journals and newsletters, and special flyers and brochures. Nearly 3,000 flyers were disseminated, followed by a 14,500 piece mailing of conference brochures. One participant wrote, "The brochure itself is a teaching tool!"

Requests for more information about the conference and/or LRE were received from 33 states prior to the event. Seventy-four individuals returned the conference registration form indicating that they could not attend but wanted to be added to Indiana's LRE mailing list to receive information including proceedings from the conference. Of this group, requests came most often from teachers and agency administrators.

An executive summary of the Conference will be available mid-August.

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ORDER FORM
1987 NATIONAL LEADERSHIP CONFERENCE
LEAST RESTRICTIVE ENVIRONMENT: COMMITMENT TO IMPLEMENTATION

WEDNESDAY, MAY 20, 1987

TAPE #1	________	THE OSEP PLAN FOR LRE: SCHOOLS ARE FOR EVERYBODY: THOMAS BELLAMY, DIRECTOR, OFFICE OF SPECIAL EDUCATION PROGRAMS, U.S. DEPARTMENT OF EDUCATION.
TAPE #2	________	EFFECTIVENESS OF INTEGRATED COMMUNITY BASED PROGRAMS FOR STUDENTS WITH SEVERE HANDICAPS. OPENING ADDRESS: WAYNE SAILOR, PROFESSOR, SAN FRANCISCO STATE UNIVERSITY, CALIFORNIA.
TAPE #3	________	QUALITY INDICATORS OF EXEMPLARY SECONDARY SCHOOL PROGRAMS: KNOWING WHEN YOU'RE DOING A GOOD JOB. BARBARA WILCOX, PROFESSOR OF SPECIAL EDUCATION, INDIANA UNIVERSITY.
TAPE #4	________	A COLLABORATIVE MODEL FOR STATEWIDE IMPLEMENTATION.
TAPE #5	($10.50)	PARENTS ROLE IN QUALITY SCHOOL PROGRAMS. (TWO TAPES)
TAPE #6	________	DEVELOPING DISTRICT LEVEL SUPPORT FOR LRE.

THURSDAY, MAY 21, 1987

TAPE #7	________	VERNON JOHNSON, ASSISTANT SUPERINTENDENT, INDIANAPOLIS PUBLIC SCHOOLS
TAPE #8	($10.50)	MIKE HARDMAN, PROFESSOR AND CHAIR, DEPARTMENT OF SPECIAL EDUCATION OF UTAH. (TWO TAPES)
TAPE #9	________	CORY MOORE, PARENT ADVOCATE, MONTGOMERY COUNTY, MD.
TAPE #10	________	DEVELOPING BUILDING LEVEL SUPPORT AMONG ADMINISTRATORS AND STUDENT BODY.
TAPE #11	________	TEACHER AND RELATED STAFF PREPARATION.
TAPE #12	________	PLANNING FOR POST-SCHOOL TRANSITION.
TAPE #13	($10.50)	LOU BROWN: PREPARING STUDENTS WITH SEVERE INTELLECTUAL DISABILITIES TO LIVE, WORK AND PLAY IN INTEGRATED SETTINGS. (TWO TAPES)

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